

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 07, 2009  
Secretary of State**

DOCUMENT# N93000004549

Entity Name: TRENT CONDOMINIUM C ASSOCIATION, INC.

**Current Principal Place of Business:**

4373 ROCK ISLAND ROAD  
LAUDERHILL, FL 33319 US

**New Principal Place of Business:**

**Current Mailing Address:**

4373 ROCK ISLAND ROAD  
LAUDERHILL, FL 33319 US

**New Mailing Address:**

FEI Number: 65-0439797      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ABRAMSON, MILDRED  
C/O MWI/CAMPBELL  
4373 ROCK ISLAND RD.  
LAUDERHILL, FL 33319 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: TD ( ) Delete  
Name: SADOWITZ, CORY  
Address: 7418 TRENT DR  
City-St-Zip: TAMARAC, FL 33321

Title: PD ( ) Delete  
Name: STEVENS, BOB  
Address: 7470 TRENT DRIVE  
City-St-Zip: TAMARAC, FL 33321

Title: SD ( ) Delete  
Name: ABRAMSON, MILDRED  
Address: 7484 TRENT DR  
City-St-Zip: TAMARAC, FL

Title: VD ( ) Delete  
Name: SINGER, BERNICE  
Address: 7490 TRENT DR  
City-St-Zip: TAMARAC, FL 33321

Title: VD ( ) Delete  
Name: DIAMOND, DEENA  
Address: 7472 TRENT DR  
City-St-Zip: TAMARAC, FL 33321

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MILDRED ABRAMSON

SD

04/07/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date