

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003639

FILED  
Mar 03, 2009  
Secretary of State

Entity Name: MEDITERRANEA ON HILLSBORO MILE CONDOMINIUM ASSOCIATION, INC.

## Current Principal Place of Business:

1230 HILLSBORO MILE  
HILLSBORO BEACH, FL 33062

## New Principal Place of Business:

C/O A&N MANAGEMENT, INC.  
902 CLINT MOORE ROAD, #110  
BOCA RATON, FL 33487

## Current Mailing Address:

C/O A & N MANAGEMENT  
902 CLINT MOORE RD #110  
BOCA RATON, FL 33487

## New Mailing Address:

C/O A&N MANAGEMENT, INC.  
902 CLINT MOORE ROAD #110  
BOCA RATON, FL 33487

FEI Number: 65-0813753

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SACH, SAX & KLEIN, PA  
301 YAMATO RD  
BOCA RATON, FL 33431 US

## Name and Address of New Registered Agent:

SACH, SAX & CAPLAN  
6111 BROKEN SOUTH PARKWAY, N.W  
BOCA RATON, FL 33487 US

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: LOU CAPLAN

03/03/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: VPT ( ) Delete  
Name: O'FARRELL, STEPHEN  
Address: 1228 HILLSBORO MILE #201  
City-St-Zip: HILLSBORO BEACH, FL 33062

Title: VPS ( ) Delete  
Name: LARKIN, PETER  
Address: 1228 HILLSBORO MILE #106  
City-St-Zip: HILLSBORO BEACH, FL 33062

Title: P ( ) Delete  
Name: LODICE, AUSTIN  
Address: 1230 HILLSBORO MILE #110  
City-St-Zip: HILLSBORO BEACH, FL 33062

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: IODICE, AUSTIN  
Address: 1230 HILLSBORO MILE #110  
City-St-Zip: HILLSBORO BEACH, FL 33062

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

Title: TD (X) Change ( ) Addition  
Name: O'FARRELL, STEPHEN  
Address: 1228 HILLSBORO MILE #201  
City-St-Zip: HILLSBORO BEACH, FL 33062

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: AUSTIN IODICE

PRES

03/03/2009

Electronic Signature of Signing Officer or Director

Date