

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 758213

FILED  
Mar 24, 2009  
Secretary of State

**Entity Name:** OAK CIRCLE CONDOMINIUM WAREHOUSE ASSOCIATION, INC.

**Current Principal Place of Business:**

500 NE SPANISH RIVER BLVD  
SUITE 18  
BOCA RATON, FL 33431

**New Principal Place of Business:**

**Current Mailing Address:**

500 NE SPANISH RIVER BLVD  
SUITE 18  
BOCA RATON, FL 33431

**New Mailing Address:**

**FEI Number:** 59-2151531

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILLIS, ERNEST  
500 NE SPANISH RIVER BLVD  
SUITE 8  
BOCA RATON, FL 33431 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: PD ( ) Delete  
Name: CASE, CLIFFORD  
Address: 4201 OAK CIR. DR. #38  
City-St-Zip: BOCA RATON, FL 33431

Title: STD ( ) Delete  
Name: BORS, SIDNEY  
Address: 4201 OAK CIR. DR. #29  
City-St-Zip: BOCA RATON, FL 33431

Title: VPD ( ) Delete  
Name: WINANS, STUART  
Address: 4201 OAK CIRCLE #41  
City-St-Zip: BOCA RATON, FL 33431

Title: D ( ) Delete  
Name: WINANS, ARLENE  
Address: 4201 OAK CIRCLE #41  
City-St-Zip: BOCA RATON, FL 33431

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

Title: PD (X) Change ( ) Addition  
Name: CASE, CLIFFORD  
Address: 4201 OAK CIR. #38  
City-St-Zip: BOCA RATON, FL 33431

Title: STD (X) Change ( ) Addition  
Name: BORS, SIDNEY  
Address: 4201 OAK CIR. #29  
City-St-Zip: BOCA RATON, FL 33431

Title: VPD (X) Change ( ) Addition  
Name: WINANS, STUART  
Address: 4201 OAK CIR #41  
City-St-Zip: BOCA RATON, FL 33431

Title: D (X) Change ( ) Addition  
Name: WINANS, ARLENE  
Address: 4201 OAK CIR #41  
City-St-Zip: BOCA RATON, FL 33431

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: CLIFFORD CASE

PD

03/24/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date