2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 21, 2009
Secretary of State

DOCUMENT# N08000010179

Entity Name: 595 CORPORATE PARK OF COMMERCE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4651 SHERIDAN STREET UNIT 335
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

4651 SHERIDAN STREET UNIT 335
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 80-0303879 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LECHTER, ROBERT
1150 B EAST HALLANDALE BEACH BLVD
HALLANDALE BEACH, FL 330094722 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: LECHTER, ROBERT
Address: 4651 SHERIDAN STREET UNIT 335
City-St-Zip: HOLLYWOOD, FL 33021

Title: VD ( ) Delete
Name: HOUSTON, BRETT
Address: 4651 SHERIDAN STREET UNIT 335
City-St-Zip: HOLLYWOOD, FL 33021

Title: STD ( ) Delete
Name: PRADO, ANGELA
Address: 4651 SHERIDAN STREET UNIT 335
City-St-Zip: HOLLYWOOD, FL 33021

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:

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: ROBERT LECHTER DIR 05/21/2009

Electronic Signature of Signing Officer or Director — Date