

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000445

Entity Name: WELDON CONDOMINIUM B ASSOCIATION, INC.**Current Principal Place of Business:**C/O CCM, INC
7124 N NOB HILL RD
TAMARAC, FL 33321**Current Mailing Address:**C/O CCM, INC
7124 N NOB HILL RD
TAMARAC, FL 33321 US**FEI Number:** 65-0563822**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KAYE & BENDER, P.L.
1200 PARK CENTRAL BLVD SO
POMPAÑO BEACH, FL 33064 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**Title TREASURER
Name TUMMINELLI, BARBARA
Address 7124 N NOB HILL RD
City-State-Zip: TAMARAC FL 33321Title VP
Name COHEN, FRANK
Address 7124 N NOB HILL RD
City-State-Zip: TAMARAC FL 33321Title PRESIDENT
Name KAPLAN, SYLVIA
Address 7124 N NOB HILL RD
City-State-Zip: TAMARAC FL 33321Title DIRECTOR
Name KOHN, ALLAN
Address 7124 N NOB HILL RD
City-State-Zip: TAMARAC FL 33321Title DIRECTOR
Name SHEVELEW, EDWIN
Address 7124 N NOB HILL RD
City-State-Zip: TAMARAC FL 33321

I hereby 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 all other like empowered.

SIGNATURE: SYLVIA KAPLAN

PRESIDENT

03/15/2013

Electronic Signature of Signing Officer/Director Detail_____
Date