2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 192243

Name:

Address: City-St-Zip: SOUSA, JOHN PHILIP IV

WILDER, KY 41076 US

34 OBSERVATORY POINTE DRIVE

Entity Name: BIRCH COOPERATIVE APARTMENTS INC

FILED Apr 05, 2009 Secretary of State

Current Principal Place of Business:			New Principal F	New Principal Place of Business:	
711 BAYSHORE DR. APARTMENT 103 FT. LAUDERDALE, FL 33304			APARTMENT 20	711 BAYSHORE DR. APARTMENT 202 FT. LAUDERDALE, FL 33304	
Current Mailing Address:			New Mailing Ad	New Mailing Address:	
711 BAYSHORE DR. APARTMENT 103 FT. LAUDERDALE, FL 33304				1605 N.E. 17 AVENUE FT. LAUDERDALE, FL 33305	
FEI Number:	59-0969099	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Addr	Name and Address of New Registered Agent:	
3101 NOR SUITE 301	CHARD K ES TH FEDERAL , CITIBANK E JDERDALE, F	. HIGHWAY			
	named entity of Florida.	submits this statement for the p	urpose of changing its regi	stered office or registered agent, or both,	
SIGNATUR	RE:				
	Electro	nic Signature of Registered Age	nt	Date	
Election Can	npaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CH	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	SOUSA, JOHN 711 BAYSHOF) Delete PHILLIP III RE DRIVE, APT. 103 RDALE, FL 33304 US	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	PERRY, CHAR 1605 NE 17TH		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title:	VPAS () Delete	Title:	() Change () Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: CHARLES B. PERRY SEC. 04/05/2009