

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722789

FILED  
Jan 06, 2009  
Secretary of State

Entity Name: WIMBLEDON TOWNHOUSE CONDOMINIUM I ASSOCIATION, INC.

## Current Principal Place of Business:

4800 N STATE RD 7  
SUITE F105  
LAUDERDALE LAKES, FL 33319 US

## New Principal Place of Business:

## Current Mailing Address:

C/O PHOENIX MGMT  
4800 N STATE RD 7 SUITE 105  
LAUDERDALE LAKES, FL 33319 US

## New Mailing Address:

FEI Number: 59-1423984      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PHOENIX MANAGEMENT  
4730 N STATE RD 7 SUITE E280  
LAUDERDALE LAKES, FL 33317 US

## Name and Address of New Registered Agent:

PHOENIX MANAGEMENT SERVICES, INC  
4800 N. STATE ROAD 7  
F 105  
LAUDERDALE LAKES, FL 33319 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: FRANKLIN J TACHER

01/06/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SPRINGER, MERLENE  
Address: 5635 NW 16TH ST  
City-St-Zip: LAUDERHILL, FL 33312

Title: S ( ) Delete  
Name: LLOYD, JACQUILINE  
Address: 1668 NW 58 AVE  
City-St-Zip: LAUDERHILL, FL 33313

Title: T ( ) Delete  
Name: SMITH, VETA  
Address: 5613NW 16 STREET  
City-St-Zip: LAUDERHILL, FL 33313

Title: D ( ) Delete  
Name: DEMERCADO, TROY  
Address: 5634 NW 16 STREET  
City-St-Zip: LAUDERHILL, FL 33313

Title: D ( ) Delete  
Name: BURNEY, GLYNIS  
Address: 1168 NW 58TH AVE  
City-St-Zip: LAUDERHILL, FL 33313

Title: D ( ) Delete  
Name: CULVER, KARON  
Address: 5705 NW 16TH STREET  
City-St-Zip: LAUDERHILL, FL 33313

## 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:

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: FRANKLIN J TACHER

LCAM

01/06/2009

Electronic Signature of Signing Officer or Director

Date