

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728082

FILED
Apr 23, 2010
Secretary of State

Entity Name: EMERALD ISLES WEST CONDOMINIUM ASSOCIATION, PHASE ONE, INC.

Current Principal Place of Business:

4850 SW 63RD TERR
DAVIE, FL 33314

New Principal Place of Business:

Current Mailing Address:

4850 SW 63RD TERR
DAVIE, FL 33314

New Mailing Address:

FEI Number: 59-1646692

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KATZMAN GARFINKEL, P.A.
1501 N.W. 49TH ST.
SUITE 202
FT. LAUDERDALE, FL 33309 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: P
Name: FOURCAND, ANTOINE
Address: 4850 S.W. 63RD TERRACE #433
City-St-Zip: DAVIE, FL 33314

Title: T
Name: SPORAR, MITCH
Address: 4850 SW 63RD TERR. #332
City-St-Zip: DAVIE, FL 33314

Title: D
Name: RISSONE, DANIEL
Address: 4850 SW 63RD TERRACE #223
City-St-Zip: DAVIE, FL 33314

Title: S
Name: GEUS, MARY
Address: 4850 SW 63RD TERR #124
City-St-Zip: DAVIE, FL 33314

Title: VP
Name: GAMBLE, ROGER
Address: 4850 SW 63RD TERR #411
City-St-Zip: DAVIE, FL 33314

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: ANTOINE FOURCAND

P

04/23/2010

Electronic Signature of Signing Officer or Director

Date