

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728082

FILED  
Apr 26, 2012  
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:**

GM FINANCIAL GROUP LIMITED, INC.  
1166 W NEWPORT CTR DR STE 211  
DEERFIELD BEACH, FL 33442 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/T  
Name: FOURCAND, ANTOINE  
Address: 4850 S.W. 63RD TERRACE #433  
City-St-Zip: DAVIE, FL 33314

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

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

Title: D  
Name: WELKER, AMBER  
Address: 4850 SW 63RD TERR #333  
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

04/26/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date