2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#730016

FILED Mar 11, 2009 Secretary of State

Entity Name: MARKHAM "F" CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O COOCVE 3025 WEST DRIVE DEERFIELD BEACH, FL 334422085

Current Mailing Address: New Mailing Address:

C/O COOCVE 3025 WEST DRIVE DEERFIELD BEACH, FL 334422085

FEI Number: 59-2070019 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CONDO OWNERS ORG OF CNTRY VILL E INC 3501 W DR DEERFIELD BEACH, FL 33442

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:

Address:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

119 MARKHAM E

(X) Change () Addition

125 MARKHAM F

() Delete LACROIX, ROLAND STAFF, ROSE Name: Name: 124 MARKHAM F Address: 113 MARKHAM F Address:

City-St-Zip: DEERFIELD BEACH, FL 33442 City-St-Zip: DEERFIELD BEACH, FL 33442

Title: SD Title: (X) Change () Addition () Delete LACROIX, J Name: BROWN, SHARON Name:

Address: 124 MARKHAM F Address: 121 RKHAM F City-St-Zip: DEERFIELD BEACH, FL 33442 City-St-Zip: DEERFIELD BEACH, FL 33442

Title: Title: (X) Change () Addition () Delete KOVACS, B MCCLELLAND, MARY ANN Name: Name: 114 MARKHAM F 126 MARKHAM F Address: Address:

City-St-Zip: DEERFIELD BEACH, FL 33442 City-St-Zip: DEERFIELD BEACH, FL 33442

Title: TD () Delete Title: D (X) Change () Addition Name: LACROIX, JULIE Name: COLE, LUCY

MARKHAM F 124 108 MARKHAM F Address: Address: City-St-Zip: DEERFIELD BEACH, FL 33442 City-St-Zip: DEERFIELD BEACH, FL 33442

Title: () Delete Title: (X) Change () Addition SANDOVAL, J MARTINEZ, SQUIB Name: Name:

DEERFIELD BEACH, FL 33442 City-St-Zip: City-St-Zip: DEERFIELD BEACH, FL 33442

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.

Address:

SIGNATURE: ROSE STAFF Ρ 03/11/2009