

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735352

FILED  
Feb 19, 2008  
Secretary of State

Entity Name: BARWOOD CONDOMINIUM I ASSOCIATION, INC.

**Current Principal Place of Business:**

23099 BARWOOD LANE NORTH  
BOCA RATON, FL 33428

**New Principal Place of Business:**

**Current Mailing Address:**

23099 BARWOOD LANE NORTH  
BOCA RATON, FL 33428

**New Mailing Address:**

FEI Number: 59-1759282

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COLWELL, EDWARD . A  
23099 BARWOOD LANE NORTH  
APT, 406  
BOCA RATON, FL 33428 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: D ( ) Delete  
Name: VALENTINE, JO-ANN  
Address: 23099 BARWOOD LN N #102  
City-St-Zip: BOCA RATON, FL 33428

Title: D ( ) Delete  
Name: DETORO, MARY  
Address: 23099 BARWOOD LANE N #208  
City-St-Zip: BOCA RATON, FL 33428

Title: PD ( ) Delete  
Name: MESSINA, ANTHONY  
Address: 23099 BARWOOD LN N #202  
City-St-Zip: BOCA RATON, FL 33428

Title: TS ( ) Delete  
Name: COLWELL, EDWARD A.  
Address: 23099 BARWOOD LANE N #406  
City-St-Zip: BOCA RATON, FL 33428

Title: VD ( ) Delete  
Name: REDDY, MARILYN  
Address: 23099 BARWOOD LN N #303  
City-St-Zip: BOCA RATON, FL 33428

Title: D ( ) Delete  
Name: GODFREY, DOROTHY  
Address: 23099 BARWOOD LN N #201  
City-St-Zip: BOCA RATON, FL 33428

**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: EDWARD A COLWELL

TS

02/19/2008

Electronic Signature of Signing Officer or Director

Date