

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741385

FILED
Mar 20, 2009
Secretary of State

Entity Name: WEDGEWOOD CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6370 PINEHURST CIRCLE W
TAMARAC, FL 33321 US

New Principal Place of Business:

Current Mailing Address:

C/O CASTLE GROUP
POST OFFICE BOX 559009
FORT LAUDERDALE, FL 333559009 US

New Mailing Address:

FEI Number: 59-1855297

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTIN, ROBERT C ESQ
MARTIN & BENNIS, P.A.
319 S E 14TH ST
FORT LAUDERDALE, FL 33316 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 () Delete
Name: SCHULTZ, MORTON
Address: 6332 WEDGEWOOD TERR
City-St-Zip: TAMARAC, FL

Title: D () Delete
Name: ROCHELLE, LYNN
Address: 6323 PINEHURST CIR WEST
City-St-Zip: TAMARAC, FL 33321

Title: SD () Delete
Name: KRULL, MARVIN
Address: 9259 WEDGEWOOD WAY
City-St-Zip: TAMARAC, FL 33321

Title: TD () Delete
Name: GINSBURG, HENRY
Address: 6384 PINHURST CIR E.
City-St-Zip: TAMARAC, FL

Title: D () Delete
Name: MAFUCCI, JOHN
Address: 6320 WEDGEWOOD TERR
City-St-Zip: TAMARAC, FL 33321 US

Title: D () Delete
Name: MAURO, NICHOLAS
Address: 9267 WEDGEWOOD DR
City-St-Zip: TAMARAC, FL 33321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: ROCHELLE, LYNN
Address: 6323 PINEHURST CIR WEST
City-St-Zip: TAMARAC, FL 33321

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: RICHMAN, ANN
Address: 6320 PINEHURST CIRCLE EAST
City-St-Zip: TAMARAC, FL 33321

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: ROBERT A. DONNELLY

MGR

03/20/2009

Electronic Signature of Signing Officer or Director

_____ Date