

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742067

FILED
Aug 29, 2009
Secretary of State

Entity Name: CANADIAN OCEAN BREEZE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

751 PINE DRIVE, # 104
POMPANO BEACH, FL 33060

New Principal Place of Business:

Current Mailing Address:

751 PINE DRIVE, # 104
POMPANO BEACH, FL 33060

New Mailing Address:

FEI Number: 59-1815577 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

KAHAN, SHIR, PL
1800 NW CORPORATE BLVD.
200
BOCA RATON, FL 33431 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: MO, ATABANI
Address: 751 PINE DRIVE #102
City-St-Zip: POMPANO BEACH, FL 33060

Title: VP () Delete
Name: HEILMAYER, JANDIERA
Address: 931 SE 9TH AVENUE
City-St-Zip: POMPANO BEACH, FL 33060

Title: S () Delete
Name: PIGUET, GILLONE
Address: 751 PINE DRIVE, UNIT 109
City-St-Zip: POMPANO BEACH, FL 33060

Title: T () Delete
Name: O'BRIEN, ROBERT
Address: 521 NORTH RIVERSIDE DRIVE, APT. 308
City-St-Zip: POMPANO BEACH, FL 33060

Title: D (X) Delete
Name: LOMBARDO, FRED
Address: 1236 HILLSBORO MILE, APT. 509
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: LEDEZMA, CONCEPCION
Address: 751 PINE DRIVE, UNIT 108
City-St-Zip: POMPANO BEACH, FL 33060

Title: D (X) Change () Addition
Name: PINTO, FRANK
Address: 22 JUDITH PLACE
City-St-Zip: WAYNE, NJ 07470

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: MO ATABANI

P

08/29/2009

Electronic Signature of Signing Officer or Director

Date