2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 28, 2007 8:00 am Secretary of State

DOCLI						ccictai	yors	
DOCUMENT # 742409 1. Entity Name ANDOVER F CONDOMINIUM ASSOCIATION, INC.						03-28-2007 900	•	
Principal Place of Business 134 ANDOVER 'F' W PALM BCH, FL 33417 US		Mailing Address SEACREST SERVICES, INC 2400 CENTREPARK DR W, STE 175		40043500				
		WEST PALM BEACH, FL	33409 US		 	 		
2. Principal Place of Business - No P.O. Box # 145 ANDOURN F		3. Mailing Address						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			02192007 _C	hg-NP CF	R2E037 (12/06)	
City & State	LN BEALH PL	City & State			4. FEI Number 59-163097	79	J	plied For t Applicable
224/-	Country	Zip	Country		5. Certificate of S	tatus Desired	\$8.75 Add Fee Require	
 	6. Name and Address of Current F	legistered Agent			7. Name and Add	dress of New Regist	ered Agent	
NADEL, NATALIE			Name	Name COULINS PATRICK J				
132 ANDOVER F W PALM BCH, FL 33417			Stree	Street Address (P.O. Box Number is Not Acceptable)				
			ىيا	PA	LM BCH	1, 122	7:-0-4	
			City			•	FL Zip Cod	11
	named entity submits this statement for ions of registered agent.	the purpose of changing its r	registered office	or register	ed agent, or both, in	the State of Florida.	I am familiar with,	and accept
SIGNATURE .	Signature, typed or printed name of registered agent a	Allem (NOTE:	Registered Agent sto	nature require	Wipen reinstating)	lun	3/24/	07
	Filing Fee Is \$61.25 Due by May 1, 2007	9. Election Cam	paign Financing	, _	\$5.00 May Be	1	check payable to Department of St	
	Due by may 1, 2007	ITUSE FUND CI			Added to Fees	1101108	zepartment or St	ate
10.	OFFICERS AND DIR		11.			SES TO OFFICERS AF	·	
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TITLE	OFFICERS AND DIR	ECTORS	TITLE	PHI	ADDITIONS/CHANG	ES TO OFFICERS A	ND DIRECTORS IN	10
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Inereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 trusted empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

GNATURE:

GNATURE:

SIGNATURE: _

SIGNATURE AND TYPED OF PRINTED HOSE OF SIGNING OFFICER OR DIRECTOR

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