

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742469

FILED
Apr 22, 2009
Secretary of State

Entity Name: SPARROWS WALK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O BENCHMARK PROPERTY MANAGEMENT
7932 WILES ROAD
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

C/O BENCHMARK PROPERTY MANAGEMENT
7932 WILES ROAD
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 59-2087992

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERT KAY R ASSOCIATES, P.A.
6261 NW 6 WAY
STE 103
FORT LAUDERDALE, FL 33309 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: MCDONALD, EARL
Address: 3100 RIVERSIDE DRIVE 212
City-St-Zip: POMPANO BEACH, FL 33065

Title: S () Delete
Name: KIRKMAN, CHERYL
Address: 3100 RIVERSIDE DRIVE
City-St-Zip: POMPANO BEACH, FL 33065

Title: D () Delete
Name: YOUNG, EDWARD
Address: 3100 RIVERSIDE DRIVE
City-St-Zip: POMPANO BEACH, FL 33065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/T (X) Change () Addition
Name: MCDONALD, EARL
Address: 3100 RIVERSIDE DRIVE 212
City-St-Zip: POMPANO BEACH, FL 33065

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: CHERYL KIRKMAN

S

04/22/2009

Electronic Signature of Signing Officer or Director

Date