

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742742

FILED  
Mar 29, 2012  
Secretary of State

**Entity Name:** ANDOVER K CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O JENNIE SCHECHTER  
259 ANDOVER K  
WEST PALM BEACH, FL 33417 US

**New Principal Place of Business:**

**Current Mailing Address:**

ANDOVER K C/O SEACREST SERVICES INC  
2400 CENTREPARK W DR #175  
WEST PALM BEACH, FL 33409 US

**New Mailing Address:**

**FEI Number:** 59-1636128      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SCHECHTER, JENNIE  
259 ANDOVER K  
WEST PALM BEACH, FL 33417 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  
Name: BONENFANT, JACQUES  
Address: 278 ANDOVER K  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: VP  
Name: DAVIES, ZACHARIE  
Address: 270 ANDOVER K  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: T  
Name: SCHECHTER, JENNIE  
Address: 259 ANDOVER K  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: S  
Name: CORBEIL, FRANCINE  
Address: 281 ANDOVER K  
City-St-Zip: WEST PALM BEACH, FL 33417 US

Title: D  
Name: LEMAY, JOCELYNE  
Address: 280 ANDOVER K  
City-St-Zip: WEST PALM BEACH, FL 33417 US

I hereby 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 all other like empowered.

SIGNATURE: GALE TERRELL

C

03/29/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date