

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743315

FILED
Apr 05, 2012
Secretary of State

Entity Name: C. & C. CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

ASSOCIATION SERVICES OF FLORIDA
10112 USA TODAY WAY
MIRAMAR, FL 33025

New Principal Place of Business:

SUNSHINE STATE PROPERTY MANAGEMENT
3650 N FEDERAL HWY, STE 201
LIGHTHOUSE POINT, FL 33064

Current Mailing Address:

ASSOCIATION SERVICES OF FLORIDA
10112 USA TODAY WAY
MIRAMAR, FL 33025

New Mailing Address:

SUNSHINE STATE PROPERTY MANAGEMENT
3650 N FEDERAL HWY, STE 201
LIGHTHOUSE POINT, FL 33064

FEI Number: 59-2266146

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKRBIN, GEORGE PRES
ASSOCIATION SERVICES OF FLORIDA
10112 USA TODAY WAY
MIRAMAR, FL 33025 US

Name and Address of New Registered Agent:

SUNSHINE STATE PROPERTY MANAGEMENT
3650 N FEDERAL HWY
SUITE 201
LIGHTHOUSE POINT, FL 33064 US

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: VALERIE SCHREIBMAN

04/05/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: SCHWARTZ, KENNETH
Address: 669 CYPRESS LANE
City-St-Zip: WILTON MANORS, FL 33305

Title: D
Name: ACKERMAN, RICHARD H
Address: 652 KENSINGTON PLACE
City-St-Zip: WILTON MANORS, FL 33305

Title: TRES
Name: GABBIANELLI, DANIEL JR
Address: 672 KENSINGTON PLACE
City-St-Zip: WILTON MANORS, FL 33305

Title: SEC
Name: PARKOSEWICH, PAUL
Address: 678 KENSINGTON PLACE
City-St-Zip: WILTON MANORS, FL 33305

Title: D
Name: GNOLFO, FRANK C
Address: 6 COVENTRY WAY
City-St-Zip: WILTON MANORS, FL 33305

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: VALERIE SCHREIBMAN

RA

04/05/2012

Electronic Signature of Signing Officer or Director

Date