2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2009
Secretary of State

DOCUMENT# 743497

Entity Name: THE WARWICK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5100 DUPONT BLVD.
FT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

5100 DUPONT BLVD.
FT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 59-1841855 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THOR, STEVEN JAY
5100 DUPONT BLVD #10F
FORT LAUDERDALE, FL 33308 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:	PD	( ) Delete
Name:	THOR, STEVEN JAY	
Address:	5100 DUPONT BLVD # 10F	
City-St-Zip:	FORT LAUDERDALE, FL 33308	
Title:	VPD	( ) Delete
Name:	CSVANY, THOMAS	
Address:	5100 DUPONT BLVD #3D	
City-St-Zip:	FORT LAUDERDALE, FL 33308	
Title:	SD	( ) Delete
Name:	SCHOOS, JAMES	
Address:	5100 DUPONT BLVD # 3M	
City-St-Zip:	FORT LAUDERDALE, FL 33308	
Title:	TD	( ) Delete
Name:	PETTERSON, EDWARD	
Address:	5100 DUPONT BLVD #9E	
City-St-Zip:	FORT LAUDERDALE, FL 33308	
Title:	D	( ) Delete
Name:	ERNST, VALARIE	
Address:	5100 DUPONT BLVD #4M	
City-St-Zip:	FORT LAUDERDALE, FL 33308	
Title:	D	( ) Delete
Name:	KLEIN, MARGARET	
Address:	5100 DUPONT BLVD #10H	
City-St-Zip:	FORT LAUDERDALE, FL 33308	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: STEVEN JAY THOR PD 03/23/2009

Electronic Signature of Signing Officer or Director — Date