2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 744923

FILED Apr 27, 2009 Secretary of State

Entity Name: THE CROSSROADS BUILDING CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 1897 PALM BEACH LAKES BLVD., #226 WEST PALM BEACH, FL 33409 **Current Mailing Address: New Mailing Address:** 1897 PALM BEACH LAKES BLVD., #226 WEST PALM BEACH, FL 33409 FEI Number: 59-1936387 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WARNER, RONALD 1897 PALM BEACH LAKES BLVD., #226 WEST PALM BEACH, FL 33409 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MYERS, MICHAEL Name: Name: 1897 PALM BEACH LAKES BLVD., #218 Address: Address: City-St-Zip: WEST PALM BEACH, FL 33409 City-St-Zip: Title: () Delete Title: () Change () Addition Name: WARNER, RONALD Name: Address: 1897 PALM BEACH LAKES BLVD., #226 Address: City-St-Zip: WEST PALM BEACH, FL 33409 City-St-Zip: Title: VPD () Delete Title: () Change () Addition MALT, ROBERT C Name: Name: 1897 PALM BEACH LAKES BLVD., #204 Address: Address: City-St-Zip: WEST PALM BEACH, FL 33409 City-St-Zip: Title: SD () Delete Title: () Change () Addition Name: FELDMAN, STUART Name: 1897 PALM BEACH LAKES BLVD., #215 Address: Address: City-St-Zip: WEST PALM BEACH, FL 33409 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: RONALD WARNER TD 04/27/2009