

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 747694

**FILED**  
**Jan 09, 2010**  
**Secretary of State**

**Entity Name:** ANNIE'S CASTLE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

905 N.E. 28TH STREET  
WILTON MANORS, FL 33334

**New Principal Place of Business:**

**Current Mailing Address:**

905 N.E. 28TH STREET  
WILTON MANORS, FL 33334

**New Mailing Address:**

**FEI Number:** 59-1926325

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HINZ, JON  
905 NE 28 ST  
APT 208  
WILTON MANORS, FL 33334 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  
**Name:** STARKEY, EDWARD A  
**Address:** 905 NE 28 ST APT 207  
**City-St-Zip:** WILTON MANORS, FL 33334

**Title:** ST  
**Name:** HINZ, JON E  
**Address:** 905 NE 28 ST APT 208  
**City-St-Zip:** WILTON MANORS, FL 33334

**Title:** DV  
**Name:** BRACE, CHRISTOPHER  
**Address:** 905 NE 28 ST APT 105  
**City-St-Zip:** WILTON MANORS, FL 33334

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:** JON E. HINZ

ST

01/09/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date