2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#750301

FILED Mar 16, 2009 Secretary of State

Entity Name: BUCKINGHAM CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:					New Principal Place of Business:			
5050 BAYVI FT. LAUDE	EW DRIVE RDALE, FL	33308	US					
Current Mailing Address:				ı	New Mailing Address:			
5050 BAYVI	EW DRIVE							
#23 FT. LAUDEI	RDALE, FL	33308	US					
FEI Number: 4	59-2042306	FEI Nu	mber Applied For()	FEI Numb	ber Not Applic	cable ()	Certificate of Status Desired (X)	
Name and	Address of	Current I	Registered Agent:	ı	Name and A	Address o	of New Registered Agent:	
	AMIN EW DR #15 DERDALE, F		US					
The above r in the State	named entity of Florida.	submits	this statement for the pu	urpose of	changing its	s registered	d office or registered agent, or botl	h,
SIGNATUR	E:							
Electronic Signature of Registered Agent				nt	Date			
OFFICERS AND DIRECTORS:				,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	VP (CAPONIGRO, 5050 BAYVIEV FORT LAUDE	W DR #5	33308	1	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	S (JAHEDI, RAMI 5050 BAYVIEV FT. LAUDERD	W DR #15	3308	1	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	PD (RAPPA, HUGH 3206 HOBBIN POMPANO BE	IS ROAD	3062	1	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (PARVIZ, JAHE 5050 BAYVIEV FORT LAUDE	W DRIVE#	33308	1	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	T (HURLEY, NIC 5050 BAYVIEN FORT LAUDE	W DR #117		1	Title: Name: Address: City-St-Zip:	T HURLEY, NI 5571 NE 26 FORT LAUD		

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: NICOLE HURLEY T 03/16/2009