

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752943

FILED
Mar 11, 2009
Secretary of State

Entity Name: CONCORD VILLAGE CONDOMINIUM VII ASSOCIATION, INC.

Current Principal Place of Business:

7750 WEST MCNAB ROAD
TAMARAC, FL 333212944

New Principal Place of Business:

Current Mailing Address:

7750 WEST MCNAB ROAD
101
TAMARAC, FL 333212944 US

New Mailing Address:

FEI Number: 59-2078203 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DWECK, DAVID
7750 W. MCNAB ROAD
APT 101
TAMARAC, FL 33321 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: DWECK, DAVID
Address: 7750 W. MCNAB RD. #101
City-St-Zip: TAMARAC, FL 33321

Title: VD () Delete
Name: MANGANO, NICHOLAS
Address: 7750 W MCNAB ROAD #303
City-St-Zip: TAMARAC, FL 33321

Title: TD () Delete
Name: GELLER, LEONARD
Address: 7750 W. MCNAB RD. #106
City-St-Zip: TAMARAC, FL 33321

Title: SD () Delete
Name: DUNCAN, VERONICA
Address: 7750 W. MCNAB ROAD #103
City-St-Zip: TAMARAC, FL 33321

Title: D () Delete
Name: BERNSTEIN, RONALD
Address: 7750 W MCNAB RD #108
City-St-Zip: TAMARAC, FL

Title: D () Delete
Name: SHAEFFER, JOSEPHINE
Address: 7750 W. MCNAB ROAD #220
City-St-Zip: TAMARAC, FL 33321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: GELLER, LEONARD
Address: 7750 W. MCNAB RD. #106
City-St-Zip: TAMARAC, FL 33321

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: GAGLIARDI, CONNIE
Address: 7750 W MCNAB RD #316
City-St-Zip: TAMARAC, FL

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: DAVID DWECK

PD

03/11/2009

Electronic Signature of Signing Officer or Director

Date