2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2008 08:00 AM
Secretary of State

DOCUMENT # 759064

1. Entity Name
THE CONCORD, CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1351 S RIDGEWOOD AVE #25 DAYTONA BEACH, FL 32114-6157	1351 S RIDGEWOOD AVE #25 DAYTONA BEACH, FL 32114-6157

01042008 No Chg-NP CR2E037 (4/06)

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4. FEI Number
59-2217819
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MUSCAT, NANCY
1351 S RIDGEWOOD AVE #25
DAYTONA BEACH, FL 32114-6157

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000777360
01/10/08-80005-001 61.25

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	ROTNE, JILL
STREET ADDRESS	5460 WEST BAYSHORE DRIVE
CITY-ST-ZIP	PORT ORANGE, FL 32127
TITLE	ST
NAME	MUSCAT, NANCY
STREET ADDRESS	1351 S. RIDGEWOOD AVE, #25
CITY-ST-ZIP	DAYTONA BCH, FL
TITLE	D
NAME	POST, ELEANOR
STREET ADDRESS	1351 S. RIDGEWOOD AVE #27
CITY-ST-ZIP	DAYTONA BEACH, FL 32114
TITLE	P
NAME	GANTNER, EGON S
STREET ADDRESS	915 ASHMEADE COURT
CITY-ST-ZIP	PORT ORANGE, FL 32127
TITLE	VP
NAME	HIDEN, LINDA
STREET ADDRESS	1351 S. RIDGEWOOD AVE, #28
CITY-ST-ZIP	DAYTONA BEACH, FL 32114
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Nancy Muscat NANCY MUSCAT 1/7/08 3862555906
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #