

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764572

FILED
Jan 29, 2009
Secretary of State

Entity Name: CORSON'S WAREHOUSE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

10855 S W 188 STREET
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

10855 S W 188 STREET
MIAMI, FL 33157

New Mailing Address:

FEI Number: 59-2314007

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORSON, CHARLES M.
18651 SW 134TH AVE
MIAMI, FL 33177 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: D () Delete
Name: CORSON, CHARLES M.,
Address: 18651 SW 134TH AVE
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: CORSON, FLORENCE,
Address: 107 GRENADA ST NE
City-St-Zip: LAKE PLACID, FL 33852

Title: VD () Delete
Name: CORSON, WILLIAM
Address: 107 GRENADA ST NE
City-St-Zip: LAKE PLACID, FL 33852

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: CHARLES M. CORSON

D

01/29/2009

Electronic Signature of Signing Officer or Director

Date