

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # 765927

1. Entity Name

WAREHOUSE CONDOMINIUM ASSOCIATION, INC.



FILED
Feb 17, 2006 08:00 AM
Secretary of State

Principal Place of Business
% WILLIAM P GILMARTIN
450 DIANA BLVD
MERRITT ISLAND FL 32953-3037

Mailing Address
% WILLIAM P GILMARTIN
450 DIANA BLVD
MERRITT ISLAND FL 32953-3037



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number
59-2360165

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GILMARTIN, ANNA L
450 DIANA BLVD
MERRITT ISLAND FL 32953

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PSTD
GILMARTIN, ANNE L
450 DIANA BLVD
MERRITT ISLAND FL 32953 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition
000000437569
02/28/06-80049-001 61.25

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
CARSWELL, HARRY
2255 N COURTENAY PKWY
MERRITT ISLAND FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
DEBLOIS, RALPH
290 PARNELL ST
MERRITT ISLAND FL 32952st ☐ Delete

TITLE
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CITY - ST - ZIP
☐ Change ☐ Addition

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

James L. H. [Signature]