

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 25, 2008 08:00 AM
Secretary of State

DOCUMENT # 766408

1. Entity Name
CORNELL CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

20801 BISCAYNE BLVD
300
ADVINTURA, FL 33180 US

Mailing Address

PO BOX 630035
MIAMI, FL 33163 US



02012008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2321267

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RONALD, HEDGES R P
20801 BISCAYNE BLVD
SUITE 300
ADVENTURA, FL 33180

**DO NOT WRITE
IN THIS SPACE**

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

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	RONALD, HEDGES R
STREET ADDRESS	PO BOX 630035
CITY-ST-ZIP	MIAMI, FL 33163
TITLE	VPD
NAME	PASSANTE, JOSEPH
STREET ADDRESS	2000 N. 47TH AVE.
CITY-ST-ZIP	HOLLYWOOD, FL 33020
TITLE	D
NAME	PASSANTE, DEBRA
STREET ADDRESS	2000 N. 47TH AVE.
CITY-ST-ZIP	HOLLYWOOD, FL 33020
TITLE	S
NAME	FISHER, SCOTT
STREET ADDRESS	1919 PLUNKETT STREET, UNIT #6
CITY-ST-ZIP	HOLLYWOOD, FL 33020
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/05/08-80052-014-70.00

**DO NOT WRITE
IN THIS SPACE**

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:

Ronald R. Hedges
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RONALD R. HEDGES Pres

2-21-08

Date

305
935-6680

Daytime Phone #