

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 770165

FILED  
Mar 26, 2009  
Secretary of State

Entity Name: CONCORD VILLAGE CONDOMINIUM XI ASSOCIATION, INC.

**Current Principal Place of Business:**

CONCORO VLA CONDO XI ASSOCIATES  
6751 UNIVERSITY DR, #314  
TAMARAC, FL 33321

**New Principal Place of Business:**

**Current Mailing Address:**

CONCORO VLA CONDO XI ASSOCIATES  
6751 UNIVERSITY DR, #314  
TAMARAC, FL 33321

**New Mailing Address:**

FEI Number: 59-2348381      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

POLIAKOFF, GARY A  
3111 STIRLING ROAD  
FT. LAUDERDALE, FL 333126525 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: MORALES, NICOLAS  
Address: 6751 N UNIVERSITY DR #314  
City-St-Zip: TAMARAC, FL 33321

Title: F ( ) Delete  
Name: MARRETT, LARRY  
Address: 6751 N UNIVERSITY DR #123  
City-St-Zip: TAMARAC, FL 33321

Title: TD ( ) Delete  
Name: LEV, ARLENE  
Address: 6751 N UNIVERSITY DR #221  
City-St-Zip: TAMARAC, FL

Title: D ( ) Delete  
Name: WOOD, LARRY  
Address: 6751 N. UNIVERSITY DR. #107  
City-St-Zip: TAMARAC, FL 33321

Title: S ( ) Delete  
Name: LEV, ARLENE  
Address: 6751 N UNIVERSITY DR #222  
City-St-Zip: TAMARAC, FL 33321

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: TD (X) Change ( ) Addition  
Name: LEV, ARLENE  
Address: 6751 N UNIVERSITY DR #221  
City-St-Zip: TAMARAC, FL 33321

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

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

Title: D ( ) Change (X) Addition  
Name: TIPTON, LESLIE  
Address: 6751 N UNIVERISTY DRIVE #320  
City-St-Zip: TAMARAC, FL 33321

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: ARLENE I LEV

TD

03/26/2009

Electronic Signature of Signing Officer or Director

Date