

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005859

FILED  
Apr 26, 2009  
Secretary of State

**Entity Name:** ANDREWS CORPORATE CENTER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3225 S. ANDREWS AVE.  
FT. LAUDERDALE, FL 33316

**New Principal Place of Business:**

3225 S. ANDREWS AVE.  
FT. LAUDERDALE, FL 33316 US

**Current Mailing Address:**

3225 S. ANDREWS AVE.  
FT. LAUDERDALE, FL 33316

**New Mailing Address:**

3225 S. ANDREWS AVE.  
FT. LAUDERDALE, FL 33316 US

**FEI Number:** 59-3751520

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FITZGERALD, JOHN J  
3225 S. ANDREWS AVE.  
FT. LAUDERDALE, FL 33316 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: DP ( ) Delete  
Name: FITZGERALD, JOHN J  
Address: 3225 S. ANDREWS AVE.  
City-St-Zip: FT. LAUDERDALE, FL 33316

Title: DV ( ) Delete  
Name: LEACH, MICHAEL  
Address: 2400 E. COMMERCIAL BLVD., STE. 706  
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: DST ( ) Delete  
Name: FITZGERALD, DEBRA  
Address: 3225 S. ANDREWS AVE.  
City-St-Zip: FT. LAUDERDALE, FL 33316

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

Title: DP (X) Change ( ) Addition  
Name: FITZGERALD, JOHN J  
Address: 3225 S. ANDREWS AVE.  
City-St-Zip: FT. LAUDERDALE, FL 33316 US

Title: DV (X) Change ( ) Addition  
Name: BARRETT, FRANK  
Address: 3223 S. ANDREWS AVENUE  
City-St-Zip: FT. LAUDERDALE, FL 33316 US

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: DEBRA FITZGERALD

DST

04/26/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date