

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000430

FILED
Apr 06, 2009
Secretary of State

Entity Name: CONGRESS COMMERCE CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2295 NW CORPORATE
601 N CONGRESS AVE
DELRAY BEACH, FL 33445

New Principal Place of Business:

601 N. CONGRESS AVENUE
SUITE 428
DELRAY BEACH, FL 33445

Current Mailing Address:

2295 NW CORPORATE
STE 138
DELRAY BEACH, FL 33445

New Mailing Address:

FEI Number: 56-2445496 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAAG MGMT & REALTY
2295 NW CORP BLVD, STE 138
BOCA RATON, FL 33431 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: FISHER, RONALD M
Address: 601 N CONGRESS AVE, # 401
City-St-Zip: DELRAY BEACH, FL 33445

Title: TD () Delete
Name: GRANT, FREDERICK
Address: 601 N CONGRESS AVE, # 405
City-St-Zip: DELRAY BEACH, FL 33445

Title: VPD () Delete
Name: KHIDIRIAN, KATHERIN
Address: 601 N CONGRESS AVE 428
City-St-Zip: DELRAY BEACH, FL 33445

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: WAKSMACKI, SUSAN
Address: 601 N CONGRESS AVE, # 209
City-St-Zip: DELRAY BEACH, FL 33445

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: SUSAN WAKSMACKI

TRES

04/06/2009

Electronic Signature of Signing Officer or Director

Date