2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001559

City-St-Zip:

FORT LAUDERDALE, FL 33321

Entity Name: YARDLEY CONDOMINIUM C ASSOCIATION, INC.

FILED Apr 29, 2009 Secretary of State

Littly Nai	ile. TARDLE	CONDOMINION C ASSOCIA	ATION, INC.				
Current P	rincipal Place	of Business:	New Prince	New Principal Place of Business:			
	KISLAND RD ALE, FL 3331	9		4373 ROCK ISLAND RD LAUDERDALE, FL 33319			
Current M	lailing Addres	s:	New Maili	New Mailing Address:			
	KISLAND RD ALE, FL 3331	9		4373 ROCK ISLAND RD LAUDERDALE, FL 33319			
FEI Number:	: 05-0559034	FEI Number Applied For()	FEI Number Not App	licable ()	Certificate of Status Des	sired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of N	lew Registered Agen	t:	
4373 ROC	L PROPERTY KISLAND RD PALE, FL 3331	MANAGEMENT 9 US	4373 ROC	CAMPBELL PROPERTY MANAGEMENT 4373 ROCK ISLAND RD LAUDERDALE, FL 33319 US			
	named entity s e of Florida.	submits this statement for the	ourpose of changing	its registered o	office or registered age	nt, or both,	
SIGNATUR	RE:				04/29/2009		
	Electron	ic Signature of Registered Ag	ent		Date		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () JAFFE, GREGO 7735 YARDLEY TAMARAC, FL	DR #114	Title: Name: Address: City-St-Zip:	()) Change ()Addition		
Title: Name: Address: City-St-Zip:	SHAPIRO, FRA 7735 YARDLEY		Title: Name: Address: City-St-Zip:	VP (X COHEN, ED 7735 YARDLEY TAMARAC, FL			
Title: Name: Address: City-St-Zip:	D () BROWN, MATT 7735 YARDLEY TAMARAC, FL		Title: Name: Address: City-St-Zip:	T (X BROWN, MATT 7735 YARDLEY TAMARAC, FL	Y DR #415		
Title: Name: Address: City-St-Zip:	D () KOESTEN, LOT 10034 W MCNA TAMARAC, FL	B RD	Title: Name: Address: City-St-Zip:	SEC (X SHAPIRO, FRA 7735 YARDLEY TAMARAC, FL	Y DRIVE # 313		
Title: Name: Address:	VP () COHEN, ED 7735 YARDLEY	Delete DR 315	Title: Name: Address:	D (X KOESTEN, LOT 7735 YARDLEY			

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.

City-St-Zip: TAMARAC, FL 33321

SIGNATURE: JOHN HARTNETT MR. 04/29/2009