

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03025

FILED  
Jan 13, 2007  
Secretary of State

**Entity Name:** EXECUTIVE WEST OFFICE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2815 W. NEW HAVEN AVE. #204  
MELBOURNE, FL 32904

**New Principal Place of Business:**

**Current Mailing Address:**

2815 W. NEW HAVEN AVE. #204  
MELBOURNE, FL 32904

**New Mailing Address:**

2381 ARIZONA STREET  
MELBOURNE, FL 32904

FEI Number: 34-2065165

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ODOM, DAN C.  
2815 WEST NEW HAVEN AVENUE  
SUITE 204  
WEST MELBOURNE, FL 32904 US

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

ODOM, DAN C.  
2815 WEST NEW HAVEN AVENUE  
SUITE 204  
WEST MELBOURNE, FL 32904 US

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: DAN C. ODOM

01/13/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: ODOM, DAN C.,  
Address: 2815 W NEW HAVEN AVE 204  
City-St-Zip: W MELBOURNE, FL

Title: STD ( ) Delete  
Name: ROWSE, JAMES,  
Address: 2381 ARIZONIA STREET  
City-St-Zip: MELBOURNE, FL 32904

Title: VD ( ) Delete  
Name: MCGUIRE, DEATRA  
Address: P O BOX 650758  
City-St-Zip: VERO BEACH, FL 32965

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES W. ROWSE

S/T

01/13/2007

Electronic Signature of Signing Officer or Director

Date