

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003480

FILED  
Jan 06, 2009  
Secretary of State

**Entity Name:** VOLTAIR WAREHOUSE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

732 SE SEAHOUSE DRIVE  
PORT ST. LUCIE, FL 34983

**New Principal Place of Business:**

1905 SW SOUTH MACIDO BLVD.  
PORT ST. LUCIE, FL 34984

**Current Mailing Address:**

732 SE SEAHOUSE DRIVE  
PORT ST. LUCIE, FL 34983

**New Mailing Address:**

1905 SW SOUTH MACIDO BLVD.  
PORT ST. LUCIE, FL 34984

FEI Number: 14-1907498

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NAVARETTA, STEPHEN ESQ.  
1100 SW ST LUCIE WEST BLVD.  
SUITE 203  
PORT ST. LUCIE, FL 34986 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: BOLAND, PATICK  
Address: 1909 S.W. BILTMORE  
City-St-Zip: PORT ST. LUCIE, FL

Title: VD ( ) Delete  
Name: HILAIRE, BENJAMIN  
Address: 3392 SW WEST GLOBE ST  
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: VP ( ) Delete  
Name: BOLONGA, FRANK  
Address: 1900 SW BILTMORE ST  
City-St-Zip: PORT SAINT LUCIE, FL 34984

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

Title: PD (X) Change ( ) Addition  
Name: BOLAND, PATICK  
Address: 1905 S.W. SOUTH MACIDO BLVD.  
City-St-Zip: PORT ST. LUCIE, FL 34984

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 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: PATRICK BOLAND

PD

01/06/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date