2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N04000006900

1. Entity Name
NINE FIFTY BROADWAY CONDOMINIUM ASSOCIATION,
INC.



Frincipal Place of Business C/O GOLDSTAR MANAGEMENT CO. 2435 US¹19, SUITE 270 HOLIDAY, FL 34691 US Mailing Address C/O GOLOSTAR MANAGEMENT CO. 2435 US 19 SUITE 270 HOLIDAY, FL 34691 US

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2. Principal P	Place of Business - No P.O. Box #	3. Mailing Address	Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			Chg-NP CF	R2E037 (12/06)		
City & State		City & State	Dity & State		4. FEI Number NOT APPI	LICABLE	<u> </u>	pplied For ot Applicable	
Zip	Country	Zip	Country		5. Certificate of	5. Certificate of Status Desired S8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
ULM, JEFFREY				Name					
C/O GOLDSTAR MANAGEMENT CO. 2435 US 19 SUITE 270				Street Address (P.O. Box Number is Not Acceptable)					
HOLIDAY,									
				City FL Zip Code					
8. 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. I am familiar with, and accept the obligations of registered agent.									
tile congui	ons of registered agent.								
SIGNATURE									
Signature, typed or printed name of registered agent and tide if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
Filing Fee is \$61.25 Due by May 1, 2007			9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	1 1	check payable to Department of St	, , ,	
10.	OFFICERS AND DIF	RECTORS	11.		ADDITIONS/CHAN	GES TO OFFICERS A	ND DIRECTORS IN	10	
title Name	P VAN HOOK, GREGORY J	🔀 Delete	TITLE NAME	٩	WALTER DE	FURD # 104	Change	⊠ Addition	
STREET ADDRESS	1155 TAMPA ROAD			ADDRESS					
CITY-ST-ZIP	PALM HABOR, FL 34683		CITY-ST		DUNG DIN	,FL 34698			
TITLE	VP	Delete	TITLE	٧P	VELLY ON		☐ Change	Addition	
NAME STREET ADDRESS	CLINE, ERNEST R 1155 TAMPA ROAD		NAME STREET A	AODRESS	KELLY MI 950 BRO	HOUAT HIGH	•		
CITY-ST-ZIP	PALM HABOR, FL 34683		CITY-ST	I		FL. 34690	Į.		
TITLE	S	₩ Delete	TITLE	S		1	☐ Change	Addition	
NAME	VAN HOOK, JANET C	• 1	NAME	ا ا	SUSAN UL	RICH # 308			
STREET ADDRESS	1155 TAMPA ROAD			ADDRESS .	•			Ì	
CITY-ST-ZIP	PALM HABOR, FL 34683		CITY-ST		DUNFOIN	,FL. 34698			
TITLE NAME		☐ Delete	TITLE NAME	T	SAM SLAU	SHTER	Change	⊠ Addition	
STREET ADDRESS				ADDRESS	950 BROAG	147 # 206		ļ	
CITY-ST-ZIP			CITY-ST	-ZIP		, FL. 34698		ĺ	
TITLE		☐ Delete	TITLE	ρ			Change	Addition	
NAME			NAME		0 680804 50 26 H1640				
STREET ADDRESS CITY-ST-ZIP			STREET A	ADDRESS .		FL 34698			
TITLE		☐ Delete	TITLE		DAMA	PG) 1010	☐ Change	☐ Addition	
NAME			NAME						
STREET ADDRESS				ADDRESS					
CITY-ST-ZIP			CITY-ST	-219					

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNAT	IIRF.
	OILE.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-7-07

727-738-0920

Daytime Phone (

FILED

Mar 23, 2007 8:00 am Secretary of State

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