

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001906

FILED
Apr 07, 2009
Secretary of State

Entity Name: WEDGEWOOD BUSINESS PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

401 NW 10 TERRACE
HALLANDALE BEACH, FL 33009

New Principal Place of Business:

Current Mailing Address:

401 NW 10 TERRACE
HALLANDALE BEACH, FL 33009

New Mailing Address:

FEI Number: 20-2679380

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MESSINGER, DAVID
401 NW 10 TERRACE
HALLANDALE BEACH, FL 33009 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: MESSINGER, DAVID
Address: 401 NW 10 TERRACE
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: VSD () Delete
Name: HIPPOLYTE, GREGORY
Address: 401 NW 10 TERRACE
City-St-Zip: HALLANDALE BEACH, FL 33009

Title: T () Delete
Name: DELAESPRIELLA, LEYLA
Address: 401 NW 10 TERRACE
City-St-Zip: HALLANDALE BEACH, FL 33009

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 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: DAVID MESSINGER

PD

04/07/2009

Electronic Signature of Signing Officer or Director

Date