

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 12, 2007 8:00 am**  
**Secretary of State**

02-23-2007 90038 010 \*\*\*\*61.25

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|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| <b>DOCUMENT # N05000004151</b><br>1. Entity Name<br><b>WEDGEWOOD BUSINESS PARK 57TH AVENUE<br/>CONDOMINIUM ASSOCIATION, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                      |                                                                                                                     |                                                                    |                                                                                                                                         |                                                                   |
| Principal Place of Business<br><b>570 ANSEL BOULEVARD<br/>HALLAND BEACH FL 33009</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                      |                                                                                                                     | Mailing Address<br><b>2117 SW 57 AVENUE<br/>HOLLYWOOD FL 33023</b> |                                                                                                                                         |                                                                   |
| 2. Principal Place of Business - No P.O. Box #<br><b>2201 -&gt; 2227 S.W. 57 Ave</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                      |                                                                                                                     | 3. Mailing Address<br>Suite, Apt. #, etc.<br>                      |                                                                                                                                         |                                                                   |
| City & State<br><b>WEST PARK FL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                      | City & State<br>                                                                                                    |                                                                    | 4. FEI Number<br><b>20-2744710</b>                                                                                                      |                                                                   |
| Zip<br><b>33083</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                      | Country<br><b>USA</b>                                                                                               |                                                                    | 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>                                         |                                                                   |
| 6. Name and Address of Current Registered Agent<br><b>MALINETESCU, VASILE<br/>2117 SW 57 AVENUE<br/>HOLLYWOOD FL 33023</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                      |                                                                                                                     |                                                                    | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><b>FL</b> 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.<br>SIGNATURE <u><i>Vasile Malinetescu</i></u> <b>VASILE MALINETESCU</b> <span style="float: right;">2/12/06</span><br><small>Signature (Print or stamped name of registered agent and title if applicable) (NOTE: Registered Agent signature required under new law)</small> DATE                                                                                                                                |                                                                      |                                                                                                                     |                                                                    |                                                                                                                                         |                                                                   |
| <b>FILE NOW: FEE IS \$61.25<br/>Due By May 1, 2007</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                      | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |                                                                    | <b>Make Check Payable to<br/>Florida Department of State</b>                                                                            |                                                                   |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                      |                                                                                                                     |                                                                    | <b>11. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 10</b>                                                                           |                                                                   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | PD<br>MALINETESCU, VASILE<br>2117 SW 57 AVENUE<br>HOLLYWOOD FL 33023 | <input type="checkbox"/> Delete                                                                                     |                                                                    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | SD<br>CARNEY, FARLEY<br>5911 RODMAN STREET<br>HOLLYWOOD FL 33023     | <input type="checkbox"/> Delete                                                                                     |                                                                    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | TD<br>THOMPSON, STEVE<br>2205 SW 57 AVENUE<br>HOLLYWOOD FL 33023     | <input type="checkbox"/> Delete                                                                                     |                                                                    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                      | <input type="checkbox"/> Delete                                                                                     |                                                                    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                      | <input type="checkbox"/> Delete                                                                                     |                                                                    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                      | <input type="checkbox"/> Delete                                                                                     |                                                                    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 817, 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 filers empowered. |                                                                      |                                                                                                                     |                                                                    |                                                                                                                                         |                                                                   |
| SIGNATURE: <u><i>Vasile Malinetescu</i></u> <b>VASILE MALINETESCU</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                      |                                                                                                                     |                                                                    | Date: <b>03/08/07</b>                                                                                                                   |                                                                   |