

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008813

FILED  
Jan 26, 2010  
Secretary of State

**Entity Name:** WILTON CENTRE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2101 NORTH ANDREWS AVENUE  
SUITE 300  
FORT LAUDERDALE, FL 33311

**New Principal Place of Business:**

**Current Mailing Address:**

2101 NORTH ANDREWS AVENUE  
SUITE 300  
FORT LAUDERDALE, FL 33311

**New Mailing Address:**

**FEI Number:** 20-3649506

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CARR, JACK  
2101 N ANDREWS AVE  
SUITE 300  
FORT LAUDERDALE, FL 33311 US

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

MOSS, SCOTT  
2101 N ANDREWS AVE  
SUITE 300  
FORT LAUDERDALE, FL 33311 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: SCOTT MOSS

01/26/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MOSS, SCOTT  
Address: 2101 N ANDREWS AVE STE 300  
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: VP  
Name: KOPLOWITZ, DAVID  
Address: 1400 E. OAKLAND PARK BLVD., SUITE 111  
City-St-Zip: OAKLAND PARK, FL 33334

Title: S  
Name: MOLDOW, BRUCE  
Address: 2101 N ANDREWS AVE STE 300  
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: T  
Name: CLARKSON, JOANNA  
Address: 2101 N ANDREWS AVE STE 300  
City-St-Zip: FORT LAUDERDALE, FL 33311

I hereby 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 all other like empowered.

SIGNATURE: SCOTT MOSS

PRES

01/26/2010

Electronic Signature of Signing Officer or Director

Date