

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000900

FILED
Feb 12, 2009
Secretary of State

Entity Name: CONGRESS COMMERCIAL CENTER CONDOMINIUM OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

5589 OKEECHOBEE BLVD., SUITE 102
W. PALM BCH, FL 33417

New Principal Place of Business:

5589 OKEECHOBEE BLVD.,
SUITE 102
WEST PALM BEACH, FL 33417

Current Mailing Address:

5589 OKEECHOBEE BLVD., SUITE 102
W. PALM BCH, FL 33417

New Mailing Address:

5589 OKEECHOBEE BLVD
SUITE 102
WEST PALM BEACH, FL 33417

FEI Number: 74-3160064

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRANE, ROBERT L
515 N. FLAGLER DR., 18TH FLOOR
W. PALM BCH, FL 33401 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: SISCA, CHARLES A
Address: 5589 OKEECHOBEE BLVD., SUITE 102
City-St-Zip: W. PALM BCH, FL 33417

Title: VSD () Delete
Name: SISCA, SHERRIE
Address: 5589 OKEECHOBEE BLVD., SUITE 102
City-St-Zip: W. PALM BCH, FL 33417

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: CHARLES SISCA

PD

02/12/2009

Electronic Signature of Signing Officer or Director

Date