2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2009
Secretary of State

DOCUMENT# N06000002262

Entity Name: MOFFETT PLACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

124 NE 3RD ST
POMPANO BEACH, FL 33060

New Principal Place of Business:

Current Mailing Address:

124 NE 3RD ST
POMPANO BEACH, FL 33060

New Mailing Address:

FEI Number: 14-1954391 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LISSABET, VIVIAN
1300 MOFFETT ST
#314
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

FARRIS, KIP
124 NE 3RD ST
POMPANO BEACH, FL 33060 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: KF 04/23/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: V ( ) Delete
Name: FERNANDEZ, DAVID
Address: 124 N.E. 3RD STREET
City-St-Zip: POMPANO BEACH, FL 33060

Title: ST ( ) Delete
Name: RENDON, PATRICIA
Address: 124 N.E. 3RD STREET
City-St-Zip: POMPANO BEACH, FL 33060

Title: PD (X) Delete
Name: LISSABET, VIVIAN
Address: 124 N.E. 3RD STREET
City-St-Zip: POMPANO BEACH, FL 33060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: FERNANDEZ, DAVID
Address: 124 N.E. 3 STREET
City-St-Zip: POMPANO BEACH, FL 33060

Title: DVP (X) Change ( ) Addition
Name: LISSABET, VIVIAN
Address: 124 N.E. 3 STREET
City-St-Zip: POMPANO BEACH, FL 33060

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 FERNANDEZ P 04/23/2009
Electronic Signature of Signing Officer or Director — Date