

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002292

FILED
Jan 18, 2007
Secretary of State

Entity Name: APEX I CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

350 E. CROWN POINT RD.
SUITE 1000
WINTER GARDEN, FL 34787

New Principal Place of Business:

Current Mailing Address:

PO BOX 394
WINDERMERE, FL 34786

New Mailing Address:

FEI Number: 20-5591740

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

APEX COMMERCE CENTER, LLC
217 CAPITOL COURT
OCOOE, FL 34761 US

Name and Address of New Registered Agent:

APEX COMMERCE CENTER, LLC
350 E. CROWN POINT RD, SUITE 1000
WINTER GARDEN, FL 34787 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:

01/18/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MELWANI, YOGESH
Address: 217 CAPITOL COURT
City-St-Zip: OCOOE, FL 34761

Title: SD () Delete
Name: JOHAR, GURPAL
Address: 6808 ROUTE 25A
City-St-Zip: OYSTER BAY COVE, NY 11791

Title: TD () Delete
Name: DHALL, JATINDER
Address: 5 SOUTHBROOK ROAD
City-St-Zip: BEDFORD, NY 10506

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MELWANI, YOGESH
Address: 350 E. CROWN POINT RD, SUITE 1000
City-St-Zip: WINTER GARDEN, FL 34787

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: DHALL, JATINDER
Address: 44 WEST PATENT ROAD
City-St-Zip: BEDFORD HILLS, NY 10507

I hereby certify that the information supplied with this filing does not qualify for the 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: YOG MELWANI

PD

01/18/2007

Electronic Signature of Signing Officer or Director

Date