

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000002393

**FILED**  
**Mar 14, 2012**  
**Secretary of State**

**Entity Name:** FIRST SOURCE COMMERCE PARK CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

855 SOUTH KINGS HIGHWAY  
FORT PIERCE, FL 34945

**New Principal Place of Business:**

809 SOUTH KINGS HIGHWAY  
FORT PIERCE, FL 34945

**Current Mailing Address:**

855 SOUTH KINGS HIGHWAY  
FORT PIERCE, FL 34945

**New Mailing Address:**

809 SOUTH KINGS HIGHWAY  
FORT PIERCE, FL 34945

**FEI Number:** 90-0337974

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VAN VONNO, FREDERIK W  
3473 SE WILLOUGHBY BOULEVARD  
DRAWER 6  
STUART, FL 34995 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:** PTS  
**Name:** INGRALDI, PETER F  
**Address:** 855 SOUTH KINGS HIGHWAY  
**City-St-Zip:** FT. PIERCE, FL 34945

**Title:** O  
**Name:** PARKER, MAURICE  
**Address:** 809 SOUTH KINGS HIGHWAY  
**City-St-Zip:** FT. PIERCE, FL 34945

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:** PETER INGRALDI

P

03/14/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date