

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003596

FILED
Apr 18, 2007
Secretary of State

Entity Name: BROADWAY CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

512 E. WASHINGTON STREET
SUITE 200
ORLANDO, FL 32801

New Principal Place of Business:

463499 STATE RD 200
YULEE, FL 32097

Current Mailing Address:

512 E. WASHINGTON STREET
SUITE 200
ORLANDO, FL 32801

New Mailing Address:

PO BOX 1987
YULEE, FL 320411987

FEI Number: 20-4622469

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUIPERS, JOE
C/O JAXBDWY OWNER LLC
512 EAST WASHINGTON ST., SUITE 200
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

PROPERTY MANAGEMENT SYSTEMS INC
463499 STATE RD 200
YULEE, FL 32097 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: TERRELL W POWELL

04/18/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KUIPERS, JOE
Address: 512 E. WASHINGTON STREET
City-St-Zip: ORLANDO, FL 32801

Title: VD () Delete
Name: PRATT, HENRY
Address: 512 E. WASHINGTON STREET
City-St-Zip: ORLANDO, FL 32801

Title: SD () Delete
Name: CARREIRO, CARYN
Address: 512 E. WASHINGTON STREET
City-St-Zip: ORLANDO, FL 32801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: TERRELL W POWELL

RA

04/18/2007

Electronic Signature of Signing Officer or Director

Date