## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000003596

FILED Jan 05, 2009 Secretary of State

Entity Name: BROADWAY CENTER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 463499 STATE RD 200 2950 HALCYON LANE YULEE, FL 32097 SUITE 606 JACKSONVILLE, FL 32223 **Current Mailing Address:** New Mailing Address: PO BOX 1987 PO BOX 551331 YULEE, FL 320411987 JACKSONVILLE, FL 32255 13 FEI Number: 20-4622469 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PROPERTY MANAGEMENT SYSTEMS INC JOEL C. CHAMBERLAIN, C.P.A., P.A. 2950 HALCYON LANE 463499 STATE RD 200 YULEE, FL 32097 SUITE 606 JACKSONVILLE, FL 32223 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: JOEL CHAMBERLAIN 01/05/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete NORMAN, MELISSA A Name: Name: 10302 DEERWOOD PARK BLVD., SUITE 125 Address: Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: Title: () Delete Title: () Change () Addition Name: STEWART, LISA Name: Address: 10302 DEERWOOD PARK BLVD., SUITE 104 Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: Title: () Delete Title: () Change () Addition GRAHEK, BARRY J Name: Name: 10302 DEERWOOD PARK BLVD., UNITS 2-6 Address: Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: Title: VΡ ( ) Delete Title: () Change () Addition DENNIS, WILLIAM G Name: Name: 10302 DEERWOOD PARK BLVD., UNITS 8-9 Address: Address: City-St-Zip: JACKSONVILLE, FL 32256 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: JOEL CHAMBERLAIN RA 01/05/2009