

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000007289

**FILED**  
**Feb 21, 2011**  
**Secretary of State**

**Entity Name:** INDEPENDENCE COMMERCE CENTER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

6499 N POWERLINE RD SUITE 301  
FT LAUDERDALE, FL 33309

**New Principal Place of Business:**

**Current Mailing Address:**

6499 N POWERLINE RD SUITE 301  
FT LAUDERDALE, FL 33309

**New Mailing Address:**

**FEI Number:** 20-8027811

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROSENBERG, ARTHUR R  
6499 N POWERLINE ROAD, SUITE 106  
FT. LAUDERDALE, FL 33309 US

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

ROSENBERG, ARTHUR R  
6499 N POWERLINE ROAD, SUITE 304  
FT. LAUDERDALE, FL 33309 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:

02/21/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: RENZULLI, EDWARD M  
Address: 6499 N POWERLINE RD SUITE 301  
City-St-Zip: FT LAUDERDALE, FL 33309

Title: DV  
Name: ROSENBERG, ARTHUR R  
Address: 6499 N POWERLINE RD, SUITE 304  
City-St-Zip: FT. LAUDERDALE,, FL 33309

Title: DST  
Name: CIULLA, LILIANE L  
Address: 6499 N POWERLINE RD SUITE 301  
City-St-Zip: FT LAUDERDALE, FL 33309

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: EDWARD M. RENZULLI

DP

02/21/2011

Electronic Signature of Signing Officer or Director

Date