

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008871

FILED
Jul 26, 2007
Secretary of State

Entity Name: WALDO'S PARADISE ON 59TH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

21 CAPE COURT
PEKIN, IL 61554

New Principal Place of Business:

Current Mailing Address:

21 CAPE COURT
PEKIN, IL 61554

New Mailing Address:

FEI Number: 20-5478940 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HEHENDRICKSON, III, ROBERT W
1206 MANATEE AVENUE WEST
BRADENTON, FL 342057518 US

Name and Address of New Registered Agent:

HENDRICKSON, III, ROBERT W
7051 MANATEE AVENUE WEST
BRADENTON, FL 34209 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: ROBERT W HENDRICKSON, III

07/26/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: SIMPSON, RONALD W
Address: 21 CAPE COURT
City-St-Zip: PEKIN, IL 61554

Title: D () Delete
Name: SIMPSON, PRISCILLA R
Address: 21 CAPE COURT
City-St-Zip: PEKIN, IL 61554

Title: D () Delete
Name: BECKMAN, DENNIS
Address: 6116 W. TUSCARORA RD
City-St-Zip: BARTONVILLE, IL 61607

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 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: RONALD W. SIMPSON

DPS

07/26/2007

Electronic Signature of Signing Officer or Director

Date