

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009042

FILED
Apr 16, 2009
Secretary of State

Entity Name: PEACOCK PLAZA COMMERCIAL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

12557 EQUINE LANE
WEST PALM BEACH, FL 33414

New Principal Place of Business:

Current Mailing Address:

12557 EQUINE LANE
WEST PALM BEACH, FL 33414

New Mailing Address:

FEI Number: 20-8017213

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WELLER, GLENN R
12557 EQUINE LANE
WEST PALM BEACH, FL 33414 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: DP () Delete
Name: WELLER, GLENN
Address: 12557 EQUINE LANE
City-St-Zip: WEST PALM BEACH, FL 33414

Title: DVT () Delete
Name: WELLER, DAVID
Address: 12557 EQUINE LANE
City-St-Zip: WEST PALM BEACH, FL 33414

Title: DS () Delete
Name: REITWYK, TOM
Address: 12557 EQUINE LANE
City-St-Zip: WEST PALM BEACH, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVT (X) Change () Addition
Name: WELLER, DAVID
Address: 4553 SW LONG BAY DRIVE
City-St-Zip: PALM CITY, FL 34990

Title: DS (X) Change () Addition
Name: REITWYK, TOM
Address: 12932 INSHORE DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: GLENN WELLER

PRES

04/16/2009

Electronic Signature of Signing Officer or Director

Date