## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000011159

FILED Apr 29, 2009 Secretary of State

Entity Name: SAWGRASS BUSINESS CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2849 SW 42ND AVENUE 8895 N. MILITARY TRAIL

PALM CITY, FL 34990 SUITE 203D

PALM BEACH GARDENS, FL 33410

Current Mailing Address: New Mailing Address:

2849 SW 42ND AVENUE 8895 N. MILITARY TRAIL

PALM CITY, FL 34990 SUITE 203D

PALM BEACH GARDENS, FL 33410

FEI Number: 20-5831504 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:

NORMAN, KENNETH A

2400 S.E. FEDERAL HIGHWAY

FOLIBITH FLOOR

SUITE 207

FOURTH FLOOR SUITE 207
STUART, FL 34994 US PORT ST. LUCIE, FL 34986 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: TERRY LANKTON 04/29/2009

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD ( ) Delete Title: P (X) Change ( ) Addition

 Name:
 SOVEREL, BRET
 Name:
 GOZDZ, NICOLE

 Address:
 2849 SW 42ND AVENUE
 Address:
 1235 SE INDIAN ST, #103

 City-St-Zip:
 PALM CITY, FL 34990
 City-St-Zip:
 STUART, FL 34886

Title: VD ( ) Delete Title: VP (X) Change ( ) Addition

Name: KIMMEL, LEE Name: ECKSTROM, MARK

Address: 2849 SW 42ND AVENUE Address: 2690 SE WILLOUGHBY BLVD

City-St-Zip: PALM CITY, FL 34990 City-St-Zip: STUART, FL 34994

Title: STD () Delete Title: T (X) Change () Addition

 Name:
 GUMBINNER, GIFFORD
 Name:
 RALICKI, DAVID

 Address:
 2849 SW 42ND AVENUE
 Address:
 1235 SE INDIAN ST, 102

 City-St-Zip:
 PALM CITY, FL 34990
 City-St-Zip:
 STUART, FL 34886

Title: ( ) Delete Title: S ( ) Change (X) Addition

 Name:
 Name:
 ZINDERMAN, MELISSA

 Address:
 Address:
 1233 SE INDIAN ST, 101

 City-St-Zip:
 City-St-Zip:
 STUART, FL 34886

Title: ( ) Delete Title: D ( ) Change (X) Addition

 Name:
 Name:
 DELATTRE, TOM

 Address:
 Address:
 1239 SE INDIAN ST, 106

 City-St-Zip:
 City-St-Zip:
 STUART, FL 34886

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: TERRY LANKTON GM 04/29/2009