

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011259

FILED
Apr 22, 2009
Secretary of State

Entity Name: ANCHOR ROAD COMMERCE CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

549 WYMORE ROAD
SUITE 206
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

549 WYMORE ROAD
SUITE 206
MAITLAND, FL 32751

New Mailing Address:

FEI Number: 20-5894337

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BIRCHMIER, RANDALL
549 WYMORE ROAD
SUITE 206
MAITLAND, FL 32751 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: PD () Delete
Name: BIRCHMIER, RANDALL
Address: 549 WYMORE ROAD, SUITE 206
City-St-Zip: MAITLAND, FL 32751

Title: STD () Delete
Name: MCGREGOR, DAVID
Address: 549 WYMORE ROAD, SUITE 206
City-St-Zip: MAITLAND, FL 32751

Title: D () Delete
Name: PICKARD, GREG
Address: 549 WYMORE ROAD, SUITE 206
City-St-Zip: MAITLAND, FL 32751

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change () Addition
Name: MCGREGOR, DAVID
Address: 549 WYMORE ROAD, SUITE 206
City-St-Zip: MAITLAND, FL 32751

Title: STD (X) Change () Addition
Name: BIGOSINKI, NICOLAS
Address: 4403 VINELAND ROAD SUITE B-7
City-St-Zip: ORLANDO, FL 32811

Title: D () Change (X) Addition
Name: WATERMAN, ROBERT
Address: 300 RYDER LANE UNIT 1024
City-St-Zip: CASSELBERRY, FL 32707

Title: D () Change (X) Addition
Name: RYAN, BOB
Address: 549 WYMORE ROAD, SUITE 206
City-St-Zip: MAITLAND, FL 32751

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: RANDY BIRCHMIER

PD

04/22/2009

Electronic Signature of Signing Officer or Director

Date