

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

DOCUMENT# N06045

**FILED**  
**Mar 01, 2011**  
**Secretary of State**

**Entity Name:** R.J.S. COMMERCE CENTER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5415 NW 15 ST.  
SUITE #25  
MARGATE, FL 33063

**New Principal Place of Business:**

**Current Mailing Address:**

5415 NW 15 ST.  
SUITE #25  
MARGATE, FL 33063

**New Mailing Address:**

**FEI Number:** 59-2778219

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DIXON, S  
5415 NW 15 ST  
#25  
MARGATE, FL 33063 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  
Name: DIXON, S.  
Address: 5415 NW 15 ST, STE 25  
City-St-Zip: MARGATE, FL 33063

Title: T  
Name: VELANDIA, FREDY  
Address: 190 SW 76 TERR.  
City-St-Zip: MARGATE, FL 33068

Title: SD  
Name: SANDERS, ANDREA  
Address: 3517 MAHOGANY WAY  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VP  
Name: TACKORE, KEELING  
Address: 9033 NW 53 ST.  
City-St-Zip: CORAL SPRINGS, FL 33067

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: S. DIXON

PD

03/01/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date