

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 28, 2009
Secretary of State**

DOCUMENT# N07000000940

Entity Name: STUART RIVER COMMERCIAL CONDOMINIUM, INC.

Current Principal Place of Business:

6151 SHADOW TREE LANE
LAKE WORTH, FL 33463

New Principal Place of Business:

7938 SW JACK JAMES DRIVE
STUART, FL 34997

Current Mailing Address:

6151 SHADOW TREE LANE
LAKE WORTH, FL 33463

New Mailing Address:

7938 SW JACK JAMES DRIVE
STUART, FL 34997

FEI Number: 26-2616553

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOLOS, GERI A
6151 SHADOW TREE LANE
LAKE WORTH, FL 33463 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: P () Delete
Name: KOLOS, EDWARD
Address: 6151 SHADOW TREE LANE
City-St-Zip: LAKE WORTH, FL 33463

Title: ST () Delete
Name: KOLOS, GERI A
Address: 6151 SHADOW TREE LANE
City-St-Zip: LAKE WORTH, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: GERI KOLOS

ST

04/28/2009

Electronic Signature of Signing Officer or Director

Date