2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# N07000004435

Entity Name: SLW BUSINESS PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1713 RIO VISTA DRIVE
FORT PIERCE, FL 34949

New Principal Place of Business:

Current Mailing Address:

1713 RIO VISTA DRIVE
FORT PIERCE, FL 34949

New Mailing Address:

FEI Number: 74-3218368 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MULDERRIG, MARTIN
1713 RIO VISTA DRIVE
FORT PIERCE, FL 34949 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: MULDERRIG, MARTIN
Address: 1713 RIO VISTA DRIVE
City-St-Zip: FORT PIERCE, FL 34949

Title: DV ( ) Delete
Name: WILLIAMS, MIKE
Address: 159 S.W. DANVILLE CIRCLE
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: DS ( ) Delete
Name: BUTTON, CHARLES
Address: 855 SUNSET DRIVE
City-St-Zip: MELBOURNE, FL 24935

Title: T ( ) Delete
Name: SINGH, DAVID
Address: 1713 RIO VISTA DRIVE
City-St-Zip: FORT PIERCE, FL 34949

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: MARTIN MULDERRIG DP 04/30/2009

Electronic Signature of Signing Officer or Director — Date