

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009099

FILED  
Apr 29, 2008  
Secretary of State

Entity Name: MID POINT COMMERCE CENTER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3300 PGA BLVD, SUITE 620  
PALM BCH GARDENS, FL 33410

**New Principal Place of Business:**

**Current Mailing Address:**

3300 PGA BLVD, SUITE 620  
PALM BCH GARDENS, FL 33410

**New Mailing Address:**

FEI Number: 26-1088354      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

STROMBERG & TARONE, PLC  
180 ROYAL PALM WAY  
SUITE 201  
PALM BEACH, FL 33480 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: PTD ( ) Delete  
Name: MCALEES, JOSHUA  
Address: 3300 PGA BLVD, SUITE 620  
City-St-Zip: PALM BCH GARDENS, FL 33410

Title: VPSD ( ) Delete  
Name: ROE, BRYAN  
Address: 3300 PGA BLVD, SUITE 620  
City-St-Zip: PALM BCH GARDENS, FL 33410

Title: D ( ) Delete  
Name: KLIEN, DAVID  
Address: 3300 PGA BLVD, SUITE 620  
City-St-Zip: PALM BCH GARDENS, FL 33410

**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:

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: JOSHUA MCALEES

PTD

04/29/2008

Electronic Signature of Signing Officer or Director

Date