

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07661

FILED  
Apr 28, 2009  
Secretary of State

**Entity Name:** CONGRESS CROSSINGS ASSOCIATION, INC.

**Current Principal Place of Business:**

4300 CATALFUMO WAY NORTH  
PALM BEACH GARDENS, FL 334104248 US

**New Principal Place of Business:**

**Current Mailing Address:**

4300 CATALFUMO WAY NORTH  
PALM BEACH GARDENS, FL 334104248 US

**New Mailing Address:**

**FEI Number:** 59-2739444

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

POSNER, MICHAEL J ESQ  
4420 BEACON CIRCLE  
WEST PALM BEACH, FL 33407 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: PRES ( ) Delete  
Name: POSNER, MICHAEL J ESQ  
Address: 4420 BEACON CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: VP ( ) Delete  
Name: LEIFER, JAMES  
Address: 3071 CONTINENTAL DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: SEC ( ) Delete  
Name: CUNNINGHAM, BART A  
Address: 1950 HILLSBORO BOULEVARD  
City-St-Zip: DEERFIELD BEACH, FL 33442

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: SEC (X) Change ( ) Addition  
Name: WHITE, WILLIAM P  
Address: 4411 BEACON CIRCLE, SUITE 4  
City-St-Zip: WEST PALM BEACH, FL 33407

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: MICHAEL J. POSNER, ESQ.

PRES

04/28/2009

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

\_\_\_\_\_  
Date