

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09470

FILED  
Apr 25, 2010  
Secretary of State

**Entity Name:** 611 N.W. 60 ST. CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

% JOSEPH M. WALDRON, D.D.S.  
611 NW 60 ST., STE. A  
GAINESVILLE, FL 32607

**New Principal Place of Business:**

**Current Mailing Address:**

% JOSEPH M. WALDRON, D.D.S.  
611 NW 60 ST., STE. A  
GAINESVILLE, FL 32607

**New Mailing Address:**

FEI Number: 59-2655930

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WALDRON, JOSEPH M.  
611 NW 60 ST., STE. A  
SUITE A  
GAINESVILLE, FL 32607 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: WALDRON, JOSEPH M.  
Address: 611 NW 60 ST., STE. A  
City-St-Zip: GAINESVILLE, FL 32607

Title: VTD  
Name: ALBERT, BETTE  
Address: 613 NW 101ST ST.  
City-St-Zip: GAINESVILLE, FL 32607

Title: VD  
Name: LAPOINTE, WENDY  
Address: 611 NW 60 ST #D  
City-St-Zip: GAINESVILLE, FL 32607

Title: S  
Name: WALDRON, BETTY  
Address: 611 NW 60TH STREET, A  
City-St-Zip: GAINESVILLE, FL 32607

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: BETTY WALDRON

S

04/25/2010

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

\_\_\_\_\_  
Date