

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13435

FILED  
Jan 29, 2009  
Secretary of State

**Entity Name:** YANKEE EXECUTIVE WAREHOUSE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5300 N.W. 12TH AVE  
SUITE #6  
FT. LAUDERDALE, FL 33309 US

**New Principal Place of Business:**

**Current Mailing Address:**

5300 N.W. 12TH AVE  
SUITE #6  
FT. LAUDERDALE, FL 33309 US

**New Mailing Address:**

**FEI Number:** 59-2796149

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CROYLE, PHILIP J.  
1900 GLADES ROAD, SUITE 401  
BOCA RATON, FL 334317333 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: VP ( ) Delete  
Name: FONSECA, CLAUDIO  
Address: 5300 NW 12TH AVE, BAY # 8  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: T ( ) Delete  
Name: YOUNG, GEORGE  
Address: 109 SANDY COVE AVENUE  
City-St-Zip: ISLAMORADA, FL 33036

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

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

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

Title: P ( ) Change (X) Addition  
Name: MINYARD, LEE  
Address: 2325 JERNIGAN ROAD  
City-St-Zip: FORT PIERCE, FL 34945

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: LEE MINYARD

P

01/29/2009

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

\_\_\_\_\_  
Date