

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14154

FILED
Apr 14, 2009
Secretary of State

Entity Name: 75 W. COMMERCE CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2637 W. 81 ST.
HIALEAH, FL 33016

New Principal Place of Business:

Current Mailing Address:

2637 W. 81 ST.
HIALEAH, FL 33016

New Mailing Address:

FEI Number: 59-2748808 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE LA SIERRA, RAUL
14370 LAKE CRESCENT PL.
MIAMI LAKES, FL 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 () Delete
Name: DE LA SIERRA, RAUL
Address: 14370 LAKE CRESCENT PL.
City-St-Zip: MIAMI LAKES, FL

Title: STD () Delete
Name: DE LA SIERRA, WILLIAM
Address: 12235 S.W. 43 ST.
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: ANDERSON, BRETT
Address: 6915 ALHAMSA ST.
City-St-Zip: CORAL GABLES, FL

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: RAUL DE LA SIERRA

PD

04/14/2009

Electronic Signature of Signing Officer or Director

_____ Date