

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15446

FILED
Jan 19, 2009
Secretary of State

Entity Name: WORTH AVENUE COMMERCIAL PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O WILLIAM MALONE
2730 WORTH AVENUE UNIT "F"
ENGLEWOOD, FL 342249159

New Principal Place of Business:

C/O WILLIAM MALONE
2730 WORTH AVENUE UNIT
ENGLEWOOD, FL 342249159

Current Mailing Address:

C/O WILLIAM MALONE
2730 WORTH AVENUE UNIT "F"
ENGLEWOOD, FL 342249159

New Mailing Address:

C/O WILLIAM MALONE
2730 WORTH AVENUE UNIT
ENGLEWOOD, FL 342249159

FEI Number: 59-2521661

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALONE, WILLIAM
2730 WORTH AVE, UNIT F
ENGLEWOOD, FL 33533 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: T () Delete
Name: GRIMSHAW, EVELYN
Address: 2730 WORTH AVE UNIT F
City-St-Zip: ENGLEWOOD, FL 34224

Title: VD () Delete
Name: MALONE, WILLIAM
Address: 2730 WORTH AVE UNIT
City-St-Zip: ENGLEWOOD, FL

Title: D () Delete
Name: GIORDANO, ROSELYN
Address: 2730 WORTH AVENUE UNIT H
City-St-Zip: ENGLEWOOD, 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: EVELYN GRIMSHAW

T

01/19/2009

Electronic Signature of Signing Officer or Director

Date