## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 15, 2008 8:00 am Secretary of State

DOCUMENT # N19712  1. Entity Name BERKSHIRE I CONDOMINIUM ASSOCIATION, INC.					02-15-200	08 90011 014 ****6	1.25	
Principal Place of Business 188 BERKSHIRE I WEST PALM BEACH, FL 33417		Mailing Address C/O JANET GARNER 188 BERSHIRE I WEST PALM BEACH, FL 33417			". Er freið 18111 18881 41813		\$1 <b>1</b> 1 11\$1	
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01222008	Chg-NP	CR2E037 (12/06)		
City & State		City & State		4. FEI Numb 59-236			plied For at Applicable	
Zip _	Country	Zip	Country	5. Certificate	of Status Desired	\$8.75 Add Fee Required		
	6. Name and Address of Current	Registered Agent		7. Name and	d Address of New	Registered Agent		
GARDNER	R JANET		Name					
GARDNER, JANET 188 BERKSHIRE I WEST PALM BEACH, FL 33417			Street A	Street Address (P.O. Box Number is Not Acceptable)				
			City			FL Zip Code	е	
	named entity submits this statement fo ions of registered agent.	the purpose of changing its	registered office o	r registered agent, or bo	oth, in the State of		and accept	
	Signature, typed or printed name of registered agent	and title if applicable. (NOTI	E: Registered Agent signal	ture required when reinstating)		DATE		
	Signature, typed or printed name of registered agent in the second secon	ł	mpaign Financing	\$5.00 May Added to Fees		Make check payable to orida Department of St		
10.	Filing Fee is \$61.25	9. Election Car Trust Fund C	mpaign Financing	\$5.00 May Added to Fees	f f	Make check payable to	tate	
10. TITLE	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Car Trust Fund C	mpaign Financing Contribution.	S5.00 May Added to Fees ADDITIONS/CF	HANGES TO OFFIC	Make check payable to lorida Department of St	tate	
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2. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jane Mardun JAne T GAV dner 2-13-08 561-615-3018

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Dat