

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24690

FILED
Jan 18, 2005
Secretary of State

Entity Name: HAMILTON COMMERCIAL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

245 N. TAMIAMI TRAIL
SUITE C-1
VENICE, FL 34285 US

New Principal Place of Business:

Current Mailing Address:

1505 S TAMIAMI TR
UNIT 405
VENICE, FL 34292

New Mailing Address:

1505 S TAMIAMI TR
UNIT 405
VENICE, FL 34285

FEI Number: 65-0642883

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRIS, GEOFFREY
1505 S TAMIAMI TRAIL UNIT 405
VENICE, FL 34292 US

Name and Address of New Registered Agent:

MORRIS, GEOFFREY
1505 S TAMIAMI TRAIL UNIT 405
VENICE, FL 34285 US

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: _____

01/18/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: STD () Delete
Name: HAMILTON, ROBERT J.,
Address: 245 N TAMIAMI TRAIL STE C-1
City-St-Zip: VENICE, FL 34285

Title: PD () Delete
Name: MORRIS, GEOFFREY D.,
Address: 1505 SOUTH TAMIAMI TRAIL, UNIT 405
City-St-Zip: VENICE, FL 34292

Title: D () Delete
Name: MORRIS, PAMELA
Address: 1505 S TAMIAMI TRL UNIT 405
City-St-Zip: VENICE, FL 34292

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change () Addition
Name: MORRIS, GEOFFREY D.,
Address: 1505 SOUTH TAMIAMI TRAIL, UNIT 405
City-St-Zip: VENICE, FL 34285

Title: D (X) Change () Addition
Name: MORRIS, PAMELA
Address: 1505 S TAMIAMI TRL UNIT 405
City-St-Zip: VENICE, FL 34285

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GEOFFREY MORRIS

PD

01/18/2005

Electronic Signature of Signing Officer or Director

Date