

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24690

FILED  
Apr 24, 2012  
Secretary of State

**Entity Name:** HAMILTON COMMERCIAL CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

245 N. TAMiami TRAIL  
SUITE B  
VENICE, FL 34285 US

**New Principal Place of Business:**

245 N. TAMiami TRAIL  
SUITE E  
VENICE, FL 34285 US

**Current Mailing Address:**

245 N. TAMiami TRAIL  
SUITE B  
VENICE, FL 34285 US

**New Mailing Address:**

245 N. TAMiami TRAIL  
SUITE E  
VENICE, FL 34285 US

**FEI Number:** 65-0642883

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

AMBLER BUSINESS SOLUTIONS  
245 TAMiami TRAIL NORTH  
SUITE B  
VENICE, FL 34285 US

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

AMBLER BUSINESS SOLUTIONS  
827 AUTUMNCREST DRIVE  
SARASOTA, FL 34232 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:

04/24/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SWATEK, ERIC  
Address: 245 N. TAMiami TRAIL, STE B  
City-St-Zip: VENICE, FL 34285

Title: BM  
Name: GEOFFREY, MORRIS  
Address: 245 TAMiami TRAIL N, STE E  
City-St-Zip: VENICE, FL 34285 US

Title: TSR  
Name: SALVATI, RODNEY  
Address: 245 TAMiami TRAIL N, STE C-1  
City-St-Zip: VENICE, FL 34285

I hereby 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 all other like empowered.

SIGNATURE: GEORFFREY MORRIS

BM

04/24/2012

Electronic Signature of Signing Officer or Director

Date