

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26092

FILED
Apr 28, 2009
Secretary of State

Entity Name: WCB CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1743 NORTHGATE BLVD
SARASOTA, FL 34234 US

New Principal Place of Business:

Current Mailing Address:

1743 NORTHGATE BLVD
SARASOTA, FL 34234 US

New Mailing Address:

FEI Number: 65-0121981

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LOWERY, DAVID A
1743 NORTHGATE BLVD
SARASOTA, FL 34234 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: P () Delete
Name: CRISSY, BRUCE
Address: 1743 NORTHGATE BLVD
City-St-Zip: SARASOTA, FL 34234 US

Title: VT () Delete
Name: LOWERY, DAVIDA
Address: 1743 NORTHGATE BLVD.
City-St-Zip: SARASOTA, FL 34234 US

Title: S () Delete
Name: TOWN, MICHAEL
Address: 1743 NORTHGATE BLVD.
City-St-Zip: SARASOTA, FL 34234

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LAWERENCE, DANIEL
Address: 1743 NORTHGATE BLVD
City-St-Zip: SARASOTA, FL 34234 US

Title: VT (X) Change () Addition
Name: LOWERY, DAVID A
Address: 1743 NORTHGATE BLVD.
City-St-Zip: SARASOTA, FL 34234 US

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: DAVID A. LOWERY

Electronic Signature of Signing Officer or Director

VT

04/28/2009

Date