

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 27, 2008 08:00 AM
Secretary of State

DOCUMENT # N26904

1. Entity Name
EXECUTIVE AIRPORT CONDOMINIUM ONE, INC.



Principal Place of Business
% RAUCH WEAVER NORFLEET KURTZ
5300 NORTH FEDERAL HWY
FORT LAUDERDALE, FL 33334

Mailing Address
% RAUCH WEAVER NORFLEET KURTZ
5300 NORTH FEDERAL HWY
FORT LAUDERDALE, FL 33334



03202008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0077100

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent:

RAUCH WEAVER NORFLEET KURTZ & CO
5300 NORTH FEDERAL HWY
FT. LAUDERDALE, FL 33308

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing
☐ **Trust Fund Contribution.**

\$5.00 May Be
Added to Fees

000000871807
04/10/08-80011-019.61.25

10. OFFICERS AND DIRECTORS

TITLE P
NAME WEAVER, GEORGE W
STREET ADDRESS 5300 N FEDERAL HWY
CITY-ST-ZIP FT. LAUDERDALE, FL 33308

TITLE V
NAME MAXWELL, GEORGE
STREET ADDRESS 5300 N FEDERAL HWY
CITY-ST-ZIP FT. LAUDERDALE, FL 33308

TITLE S
NAME MARQUEZ, EDUARDO
STREET ADDRESS 5300 N FEDERAL HWY
CITY-ST-ZIP FT LAUDERDALE, FL 33308

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-20-08 954
771-4400