

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N28875

**FILED**  
**Feb 17, 2010**  
**Secretary of State**

**Entity Name:** 4TH STREET CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

550 S. BREVARD AVENUE  
UNIT 521  
COCOA BEACH, FL 22312

**New Principal Place of Business:**

**Current Mailing Address:**

550 S. BREVARD AVENUE  
UNIT 521  
COCOA BEACH, FL 22312

**New Mailing Address:**

**FEI Number:** 59-3075431

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

YOGESHKUMAR, PATEL  
6850 N. ATLANTIC AVENUE  
CAPE CANAVERAL, FL 32920 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: PD  
Name: YOGESHKUMAR, PATEL  
Address: 6820 N. ATLANTIC AVENUE  
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: TD  
Name: TIPTON, DAVID  
Address: 550 S. BREVARD AVENUE  
City-St-Zip: COCOA BEACH, FL 32931

Title: SD  
Name: DYER, MICHAEL  
Address: 442 SO ATLANTIC AVENUE #1  
City-St-Zip: COCOA BEACH, FL 32931

Title: D  
Name: CAMPBELL, KYLE  
Address: 442 S ATLANTIC AVE #3  
City-St-Zip: COCOA BEACH, FL 32931

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: DAVID M. TIPTON

TREA

02/17/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date