

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31507

FILED
Jan 07, 2007
Secretary of State

Entity Name: NORCOM CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2454 MCMULLEN BOOTH ROAD
SUITE 601
CLEARWATER, FL 33759

New Principal Place of Business:

Current Mailing Address:

2454 MCMULLEN BOOTH ROAD
SUITE 601
CLEARWATER, FL 33759

New Mailing Address:

FEI Number: 59-2939579

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZDELLA, EDWARD
2454 MCMULLIN BOOTH RD
SUITE 601
CLEARWATER, FL 33759 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: PTD () Delete
Name: ZBELLA, EDWARDL A
Address: 2454 MCMULLEN BOOTH RD., STE 601
City-St-Zip: CLEARWATER, FL 34619

Title: SD () Delete
Name: NEMEC, LISA A.
Address: 2454 MCMULLEN BOOTH RD., STE 601
City-St-Zip: CLEARWATER, FL 34619

Title: D () Delete
Name: POWELL, ALAN
Address: 2454 MCMULLEN BOOTH RD., STE 601
City-St-Zip: CLEARWATER, FL 34619

Title: D () Delete
Name: FISHMAN, STAN
Address: 2454 MCMULLON BOOTH RD STE 607
City-St-Zip: CLEARWATER, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: EDWARD A ZBELLA

PTD

01/07/2007

Electronic Signature of Signing Officer or Director

Date