2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39812

FILED Apr 23, 2007 Secretary of State

Entity Name: HHH COMMERCE CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:			New Princi	New Principal Place of Business:		
353 W R	OGERS CIRCLE	≣		GERS CIRCLE DN, FL 33487	US	
	TON, FL 33487	US	200, (10, (1)	211, 12 33 131		
urrent Mailing Address:			New Mailin	New Mailing Address:		
P.O. BOX P.O. BOX BOCA RA		US				
El Number	: 65-0251697	FEI Number Applied For ()	FEI Number Not Applic	able () C	ertificate of Status Desired ()	
lame and	d Address of Cu	urrent Registered Agent:	Name and A	Address of Nev	v Registered Agent:	
UITE 201	ATLANTIC AVEN 1 BEACH, FL 334					
	e named entity si e of Florida.	ubmits this statement for the p	ourpose of changing its	registered offic	e or registered agent, or bo	
the State	e of Florida. Î	·		registered offic	e or registered agent, or bo	
the State	e of Florida. Î	ubmits this statement for the p		registered offic	e or registered agent, or bo Date	
the State	e of Florida. Î	c Signature of Registered Age	ent			
the State IGNATUI FFICER: tle: ame: ddress:	e of Florida. RE: Electronic S AND DIRECT	c Signature of Registered Age ORS: Delete ALD S CIRCLE, #5	ent	S/CHANGES TO	Date	
the State	e of Florida. RE: Electronic S AND DIRECT PD () I EDELMAN, DON, 6353 W ROGER BOCA RATON, F	c Signature of Registered Age ORS: Delete ALD S CIRCLE, #5 'L 33487 Delete HAEL S CIRCLE #4	ent ADDITIONS Title: Name: Address:	S/CHANGES TO	Date OFFICERS AND DIRECT	
pFFICER: ttle: ame: ddress: itty-St-Zip: ttle: ame: ddress:	e of Florida. RE: Electronic S AND DIRECT PD ()I EDELMAN, DON. 6353 W ROGER BOCA RATON, F VD ()I VISLOCKY, MICI 6353 W ROGER BOCA RATON, F	c Signature of Registered Age ORS: Delete ALD S CIRCLE, #5 EL 33487 Delete HAEL S CIRCLE #4 EL 33487 Delete RS CIRCLE., #1	ADDITIONS Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	6/CHANGES TO	Date DOFFICERS AND DIRECT nange () Addition nange () Addition NE CIRCLE., #4	

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: NANCY UNGAR S 04/23/2007