

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49909

FILED
Jan 16, 2009
Secretary of State

Entity Name: IVANHOE EAST AT CENTURY VILLAGE CONDOMINIUM #III ASSOCIATION, INC.

Current Principal Place of Business:

13460 SW 10 STREET
SUITE 101
PEMBROKE PINES, FL 33027 US

New Principal Place of Business:

Current Mailing Address:

13460 SW 10 STREET
SUITE 101
PEMBROKE PINES, FL 33027 US

New Mailing Address:

FEI Number: 65-0413631

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OTTO, CHARLIE ESQ
2699 STIRLING RD STE C--207
FORT LAUDERDALE, FL 33312 US

Name and Address of New Registered Agent:

OTTO, CHARLIE ESQ
2699 STIRLING RD
SUITE C-207
FORT LAUDERDALE, FL 33312 US

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:

01/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PT () Delete
Name: HIRSCH, MEL
Address: 13105 SW 16TH CT. L-411
City-St-Zip: HOLLYWOOD, FL 33027

Title: VP () Delete
Name: COSTELLO, TONY
Address: 13455 SW 167TH CT
City-St-Zip: PEMBROKE PINES, FL 33027

Title: D () Delete
Name: AVERBACK, AURTHOR
Address: 13255 10TH CT
City-St-Zip: PEMBROKE PINES, FL 33027

Title: S () Delete
Name: SCHNEIDER, SELMA
Address: 13355 16TH CT.
City-St-Zip: HOLLYWOOD, FL 33027

Title: D () Delete
Name: DORFELD, ADA
Address: 12955 SW 16TH COURT M-401
City-St-Zip: PEMBROKE PINES, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: COSTELLO, ANTHONY
Address: 13455 SW 167TH CT
City-St-Zip: PEMBROKE PINES, FL 33027

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 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: MEL HIRSCH

P

01/16/2009

Electronic Signature of Signing Officer or Director

Date