


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2007 08:00 AM
Secretary of State

DOCUMENT # N50869 1. Entity Name 333 BUILDING CONDOMINIUM ASSOCIATION, INC.	
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Principal Place of Business C/O LUCY R. MCCARTNEY 333 TRESSLER DRIVE STUART, FL 34994	Mailing Address C/O ARA HATCHER 595 S.E. NOME DRIVE PORT ST. LUCIE, FL 34984
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02182007 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0379285	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SUNDHEIM, FREDERICK G JR. 310 S.W. OCEAN BLVD. STUART, FL 34994
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**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST MCCARTNEY, LUCY R 45 WEST HIGH POINT RD. STUART, FL 34996
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCCARTNEY, RON 45 WEST HIGH POINT RD. STUART, FL 34996
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HATCHER, ARA 595 S.E. NOME DR. PORT ST. LUCIE, FL 34984
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03/23/07-80070-024 61.25

**DO NOT WRITE
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:  **2/28/07** **7722858835**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #