

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 16, 2007  
Secretary of State**

DOCUMENT# N96000001647

Entity Name: WINTER PARK COMMERCE CENTER, A CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3580 ALOMA AVE., #4  
WINTER PARK, FL 32792 US

**New Principal Place of Business:**

**Current Mailing Address:**

3580 ALOMA AVE., #4  
WINTER PARK, FL 32792 US

**New Mailing Address:**

FEI Number: 59-3374334      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

VEDI, PARDEEP K  
3586 ALOMA AVE.  
#3  
WINTER PARK, FL 32792 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: TD ( ) Delete  
Name: VEDI, PARDEEP K  
Address: 3586 ALOMA AVE., #3  
City-St-Zip: WINTER PARK, FL 32792 US

Title: VD ( ) Delete  
Name: DE BATES, DALE  
Address: 3580 ALOMA AVENUE #13  
City-St-Zip: WINTER PARK, FL 32792

Title: PD ( ) Delete  
Name: BRENNER, CHARLES  
Address: 3586 ALOMA AVE., #5  
City-St-Zip: WINTER PARK, FL 32792 US

Title: S ( ) Delete  
Name: LORENZO, TOM  
Address: 3586 ALOMA AVE., #1  
City-St-Zip: WINTER PARK, FL 32792 US

Title: D ( ) Delete  
Name: CRESPO, LUIS  
Address: 3580 ALOMA AVE., #1  
City-St-Zip: WINTER PARK, FL 32792 US

**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: S (X) Change ( ) Addition  
Name: WYLER, KATHLEEN  
Address: 3580 ALOMA AVE., #4  
City-St-Zip: WINTER PARK, FL 32792 US

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: PARDEEP K VEDI

TD

04/16/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date