2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005873

FILED Feb 10, 2010 Secretary of State

Entity Name: WELDON CONDOMINIUM E ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

CONSOLIDATED COMMUNITY MANAG.

10034 W. MCNAB RD.

TAMARAC, FL 33321

C/O CCM, INC
7124 N NOB HILL RD
TAMARAC, FL 33321

TAMARAC, FL 33321

Current Mailing Address: New Mailing Address:

CONSOLIDATED COMMUNITY MANAG. C/O CCM, INC

10034 W. MCNAB RD. 7124 N NOB HILL RD TAMARAC, FL 33321 TAMARAC, FL 33321

FEI Number: 65-0803311 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

Date

KATZMAN GARFINKEL, P.A. 1501 N.W. 49TH ST. SUITE 202

FT. LAUDERDALE, FL 33309 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:

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

Title: [

Name: HOROWITZ, BERNARD Address: 7124 N NOB HILL RD City-St-Zip: TAMARAC, FL 33321

Title: PD

Name: LIEBMAN, MEL
Address: 7124 N NOB HILL RD
City-St-Zip: TAMARAC, FL 33321

Title: SD

 Name:
 BRATT, SANDY

 Address:
 7124 N NOB HILL RD

 City-St-Zip:
 TAMARAC, FL 33321

Title: VPD

Name: TRAMONTANO, THERESA Address: 7124 N NOB HILL RD City-St-Zip: TAMARAC, FL 33321

Title: TD

Name: GERBER, WALTER
Address: 7124 N NOB HILL RD
City-St-Zip: TAMARAC, FL 33321

I hereby 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 all other like empowered.

SIGNATURE: MEL LIEBMAN PD 02/10/2010