

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001265

FILED
Feb 02, 2009
Secretary of State

Entity Name: ANCHOR WAREHOUSE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

ANCHOR WAREHOUSE CONDOMINIUM
3301 SE 14 PLACE
BOYNTON BEACH, FL 33426

New Principal Place of Business:

Current Mailing Address:

D F GOUVERT
6842 BRIDLEWOOD CT
BOCA RATON, FL 33433

New Mailing Address:

FEI Number: 65-0818788

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOUVERT, DOLORES F
D F GOUVERT
6842 BRIDLEWOOD CT
DELRAY BEACH, FL 33444 US

Name and Address of New Registered Agent:

GOUVERT, DOLORES F
D F GOUVERT
6842 BRIDLEWOOD CT
DELRAY BEACH, FL 33433 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:

02/02/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: LEWIS, GARY
Address: 3301 SW 14 PLACE
City-St-Zip: BOYNTON BEACH, FL 33426

Title: PD () Delete
Name: CZARNIECKI, ZYGMUNT
Address: 3301 SW 14 PLACE
City-St-Zip: BOYNTON BEACH, FL 33426

Title: SD () Delete
Name: DEFELICE, DANIEL
Address: 3301 SW 14 PL
City-St-Zip: BOYNTON BEACH, FL 33426

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:

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: DOLORES F. GOUVERT

TD

02/02/2009

Electronic Signature of Signing Officer or Director

Date