## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000003193

FILED Jun 08, 2007 Secretary of State

Entity Name: COMMANDER ROW HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place of Business:		
	SISTER'S WE	_COME RD			
SUITE 101 AKE CIT	r, FL 32025	US			
urrent M	ailing Addres	ss:	New Maili	ng Addre	ess:
	SISTER'S WE	COME RD			
UITE 101 AKE CIT	r, FL 32025	US			
accordan		FEI Number Applied For() FEI N 3(2)(b), F.S., the corporation did not receiv Current Registered Agent:	· <del>-</del>	e.	Certificate of Status Desired ( ) of New Registered Agent:
409 SW 5 UITE 101 AKE CIT` he above	ر, FL 32025 ل named entity	LCOME RD	e of changing i	ts register	red office or registered agent, or both,
the State	e of Florida.			_	-
IGNATU					
GNATUI		nic Signature of Registered Agent			Date
IGNATUI			ADDITION	IS/CHANG	Date GES TO OFFICERS AND DIRECTOR
FFICERS le: ame: ldress:	Electron  S AND DIRECT  PD (  MORANA, FRE	TORS:  ) Delete D PD IE BLVD, SUITE 104	ADDITION Title: Name: Address: City-St-Zip:	IS/CHANG	
FFICERS le: le: ldress: ley-St-Zip: le: le: ldress: ldress:	Electron  S AND DIRECT  PD (  MORANA, FRE  8801 BISCAYN  MIAMI, FL 331	Delete D PD BEBLVD, SUITE 104 38 US Delete MEN DS BEBLVD	Title: Name: Address:	IS/CHANG	GES TO OFFICERS AND DIRECTOR
	Electron  S AND DIRECT  PD ( MORANA, FRE 8801 BISCAYN MIAMI, FL 331  SD ( MORANA, CAR 8801 BISCAYN MIAMI, FL 331	Delete D PD BE BLVD, SUITE 104 38 US Delete MEN DS E BLVD 38 US Delete LLY DT RE BLVD	Title: Name: Address: City-St-Zip: Title: Name: Address:	IS/CHANG	GES TO OFFICERS AND DIRECTOR  ( ) Change ( ) Addition

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: FRED MORANA PD 06/08/2007