2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007157

Title:

Name:

Address:

City-St-Zip:

SD

RECINE, LORETO

() Delete

2131 N. OCEAN BLVD. #17

FORT LAUDERDALE, FL 33305

FILED Apr 29, 2009 Secretary of State

Entity Name: TWENTY-ONE TWENTY-ONE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 8317 WEST ATLANTIC BLVD 2121-2131 N OCEAN DRIVE CORAL SPRINGS, FL 33071 FORT LAUDERDALE, FL 33305 **Current Mailing Address: New Mailing Address:** 8317 WEST ATLANTIC BLVD CORAL SPRINGS, FL 33071 FEI Number: 06-1569310 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: ROYAL PROPERTY MANAGEMENT INC 8317 W ATLANTIC BLVD CORAL SPRINGS, FL 33071 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 Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition DERBEDROSSIAN, SIRAN FRANCIOSI, PETER Name: Name: 2131 N. OCEAN BLVD. Address: 2121 N. OCEAN BLVD. # 4 Address: City-St-Zip: FORT LAUDERDALE, FL 33305 City-St-Zip: FORT LAUDERDALE, FL 33305 Title: () Delete Title: (X) Change () Addition Name: BUCHANAN, CELIA Name: BUCHANAN, CELIA Address: 2131 N OCEAN BLVD #11 Address: 2131 N OCEAN BLVD #11 City-St-Zip: FT LAUDERDALE, FL 33305 City-St-Zip: FT LAUDERDALE, FL 33305 Title: () Delete Title: () Change () Addition DILORENZO, JOHN Name: Name: 2121 N OCEAN BLVD #1 Address: Address: City-St-Zip: FT LAUDERDALE, FL 33305 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JOHN DILORENZO P 04/29/2009

() Change () Addition