

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 19, 2008 08:00 A**  
**Secretary of State**

DOCUMENT # N05000012196

1. Entity Name  
 I-4 COMMERCE CENTER COMMERCIAL WAREHOUSE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business I-4 COMMERCE CENTER, LLP 1800 33RD ST - STE 201 ORLANDO, FL 32839	Mailing Address I-4 COMMERCE CENTER, LLP 1800 33RD ST - STE 201 ORLANDO, FL 32839
--	--

**DO NOT WRITE IN THIS SPACE**



03082008 No Chg-NP CR2E037 (4/06)

4. FEI Number 20-3889874	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

DELATER, RICHARD E  
 1800 33RD ST  
 STE 201  
 ORLANDO, FL 32839

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25 Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

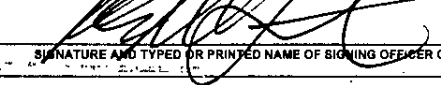
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DELATER, RICHARD E 1800 33RD ST - STE 201 ORLANDO, FL 32839
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PERTREE, JAMES M 1800 33RD ST - STE 201 ORLANDO, FL 32839
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD OWENS, ANDREW D 1800 33RD ST - STE 201 ORLANDO, FL 32839
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

000000863366  
 04/03/08-80088-017 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with an officer like empowered.

SIGNATURE:  President 3-14-08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #