## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 726241**

FILED Jan 20, 2009 Secretary of State

Entity Name: 2625 PLAZA MANAGEMENT CORPORATION, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:	
2625 S. ATLANTIC AVE DAYTONA BCH., FL 321185615 US Current Mailing Address:				2625 S. ATLANTIC AVE DAYTONA BEACH SHORES, FL 321185615 US  New Mailing Address:	
			New Maili		
2625 S. ATLANTIC AVE DAYTONA BCH., FL 321185615 US				2625 S. ATLANTIC AVE DAYTONA BEACH SHORES, FL 321185615 US	
FEI Number	: 59-1537362	FEI Number Applied For ( )	FEI Number Not App	licable ( ) Certificate of Status Desired ( )	
Name and	Address of	Current Registered Agent:	Name and	Address of New Registered Agent:	
2625 S. AT #3 NW DAYTONA The above	ER, THOMAS FLANTIC AVE A BEACH, FL I named entity of Florida.	32118 US	purpose of changing i	its registered office or registered agent, or both,	
SIGNATUI	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
OFFICER	S AND DIREC	CTORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	RIMLER, ANIT 2625 S ATLAN		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	PEACE, BILL 2625 S. ATLAN	) Delete NTIC AVE ACH SHORES, FL 32118	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	KING, DONALI 2625 S ATLAN		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DESJARDINS, 2625 S. ATLAN		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	PARRIS, RON 2625 S. ATLAN		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	PECK, EDWIN 2625 S ATLAN		Title: Name: Address: City-St-Zip:	P (X) Change ( ) Addition PECK, EDWIN W S.R. 2625 S ATLANTIC AVE DAYTONA BEACH SHORES, FL 32118	

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: ROBERT DESJARDINS T 01/20/2009