

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004615

FILED  
Mar 18, 2008  
Secretary of State

**Entity Name:** COLEMAN BUSINESS CENTRE, CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

4170 DAIRY COURT  
PORT ORANGE, FL 32127

**New Principal Place of Business:**

**Current Mailing Address:**

1326 S. RIDGEWOOD AVE  
SUITE 7  
DAYTONA BEACH, FL 32114

**New Mailing Address:**

**FEI Number:** 16-1702141      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FISHER, C E JR  
1326 S. RIDGEWOOD AVE STE 7  
DAYTONA BEACH, FL 32114 US

**Name and Address of New Registered Agent:**

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:**

Title: DP ( ) Delete  
Name: BRADY, DONALD T  
Address: 4170 DAIRY COURT #103  
City-St-Zip: PORT ORANGE, FL 32127

Title: DT ( ) Delete  
Name: FISHER, C. E JR.  
Address: 1326 S. RIDGEWOOD AVE #7  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D ( ) Delete  
Name: CASTILLO, RODOLFO  
Address: 4170 DAIRY CT #106  
City-St-Zip: PORT ORANGE, FL 32127

**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: C. E. FISHER, JR.

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

DT

03/18/2008

\_\_\_\_\_  
Date