

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004615

FILED
Mar 16, 2009
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:

1326 S. RIDGEWOOD AVE
SUITE 7
DAYTONA BEACH, FL 321146177

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:

FISHER, C E JR
1326 S. RIDGEWOOD AVE STE 7
DAYTONA BEACH, FL 321146177 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: _____

03/16/2009

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: DONALD T BRADY

DP

03/16/2009

Electronic Signature of Signing Officer or Director

Date