

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 11, 2009
Secretary of State**

DOCUMENT# N05000010093

Entity Name: FOUNDATION PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

107 SOUTH OSPREY
SUITE 100
SARASOTA, FL 34236

New Principal Place of Business:

107 SOUTH OSPREY
SUITE 100
SARASOTA, FL 34236

Current Mailing Address:

269 SOUTH OSPREY AVE STE 200
SARASOTA, FL 34236

New Mailing Address:

107 SOUTH OSPREY
SUITE 100
SARASOTA, FL 34236

FEI Number: 20-1705835

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAWSON, LISA
107 SOUTH OSPREY
SARASOTA, FL 34236 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: D () Delete
Name: WESSEL, TOM
Address: 269 SOUTH OSPREY, STE 201
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: LAWSON, DONALD M
Address: 107 SOUTH OSPREY AVE
City-St-Zip: SARASOTA, FL 34236

Title: D () Delete
Name: LAWSON, LISA M
Address: 107 SOUTH OSPREY AVE
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRD (X) Change () Addition
Name: LAWSON, LISA M
Address: 107 SOUTH OSPREY AVE
City-St-Zip: SARASOTA, FL 34236

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: LISA LAWSON

MGRD

03/11/2009

Electronic Signature of Signing Officer or Director

Date