

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21444

FILED
Jan 07, 2009
Secretary of State

Entity Name: TRIPLEX CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2521-B MARYLAND AVE
TAMPA, FL 33629

New Principal Place of Business:

2521 W. MARYLAND AVE
UNIT B
TAMPA, FL 33629

Current Mailing Address:

2521-B MARYLAND AVE
2521 W MARYLAND AVENUE, #B
TAMPA, FL 33629 US

New Mailing Address:

2521 W. MARYLAND AVE
UNIT B
TAMPA, FL 33629

FEI Number: 59-2980479

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUMPHRIES, WILLIAM F.
2521-B MARYLAND AVENUE
TAMPA, FL 33629 US

Name and Address of New Registered Agent:

HUMPHRIES, WILLIAM F.
2521 W. MARYLAND AVENUE
UNIT B
TAMPA, FL 33629 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: _____

01/07/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NELSON, MARGJE
Address: 2521-A MARYLAND AVE
City-St-Zip: TAMPA, FL

Title: SD () Delete
Name: HUMPHRIES, WILLIAM
Address: 2521-B MARYLAND AVE
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: BUCKLEW, KEITH
Address: 2521 C MARYLAND AVE
City-St-Zip: TAMPA, FL 33629

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: WILLIAM F. HUMPHRIES

P/D

01/07/2009

Electronic Signature of Signing Officer or Director

Date