

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002188

FILED
Jan 26, 2009
Secretary of State

Entity Name: ARBOR TERRACE PROFESSIONAL OFFICE PARK, CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6285 EAST FOWLER AVENUE
TAMPA, FL 336173304 US

New Principal Place of Business:

Current Mailing Address:

6285 EAST FOWLER AVENUE
TAMPA, FL 336173304 US

New Mailing Address:

FEI Number: 65-0912927

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUFFINGTON, DANIEL E DR
6285 EAST FOWLER AVENUE
TAMPA, FL 336173304 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: SD () Delete
Name: MAYA, JULIO
Address: 6265 E FOWLER AVE
City-St-Zip: TEMPLE TERRACE, FL 336173304 US

Title: VD () Delete
Name: GONZALEZ, ENRICO G
Address: 6255 E FOWLER AVE
City-St-Zip: TEMPLE TERRACE, FL 336173304 US

Title: TD () Delete
Name: BUSTAMANTE, JOSE
Address: 6275 E FOWLER AVE
City-St-Zip: TEMPLE TERRACE, FL 336173304 US

Title: PD () Delete
Name: BUFFINGTON, DANIEL E
Address: 6285 E FOWLER AVE
City-St-Zip: TEMPLE TERRACE, FL 336173304 US

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:

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: DANIEL E. BUFFINGTON

PD

01/26/2009

Electronic Signature of Signing Officer or Director

Date