

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00928

**FILED**  
**Feb 25, 2015**  
**Secretary of State**  
**CC6600511736**

**Entity Name:** 1301 BEVILLE ROAD PROFESSIONAL PLAZA  
CONDOMINIUMASSOCIATION, INC.

**Current Principal Place of Business:**

1301 BEVILLE ROAD  
SUITE 21  
DAYTONA BEACH, FL 32119

**Current Mailing Address:**

1301 BEVILLE ROAD  
SUITE 21  
DAYTONA BEACH, FL 32119

**FEI Number: 59-2909249**

**Certificate of Status Desired: Yes**

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

HASTINGS, MARY LYNN  
1301 BEVILLE ROAD  
SUITE 21  
DAYTONA BEACH, FL 32119 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRES  
Name            LILLY, RONALD  
Address        1301 BEVILLE ROAD #11  
City-State-Zip: DAYTONA BEACH FL 32119

Title            V-P  
Name            SHENBANJO, AKIN  
Address        1301 BEVILLE ROAD #5  
City-State-Zip: DAYTONA BEACH FL 32119

Title            TREA  
Name            BAXTER, AARON  
Address        3333 RIDGEWOOD AVE  
City-State-Zip: PORT ORANGE FL 32129

Title            SEC  
Name            HASTINGS, MARY LYNN  
Address        1301 BEVILLE ROAD, #21  
City-State-Zip: DAYTONA BEACH FL 32119

Title            BRD  
Name            JAMES, DENISE  
Address        1301 BEVILLE RD #18  
City-State-Zip: DAYTONA BEACH FL 32119

*I hereby 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 all other like empowered.*

**SIGNATURE: MARY LYNN HASTINGS**

**SECRETARY**

**02/25/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date