### 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: DAVID DOUMAR

Electronic Signature of Signing Officer/Director Detail

DIRECTOR

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT# N03000001771

Entity Name: MAPLEWOOD PROFESSIONAL CENTER PHASE II OFFICE CONDOMINIUM ASSOCIATION, INC.

## **Current Principal Place of Business:**

1928 COMMERCE LANE JUPITER, FL 33458

# **Current Mailing Address:**

**1928 COMMERCE LANE** JUPITER, FL 33458

## FEI Number: 20-0118004

### Name and Address of Current Registered Agent:

INGLIS, STEVE PCAM 1930 COMMERCE LANE STE #1 JUPITER, FL 33458 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/Dire	ctor Detail :			
Title	D	Title	D	
Name	DOUMAR, DAVID	Name	ROSTOCK, MATT	
Address	1930 COMMERCE LANE SUITE 1	Address	1930 COMMERCE LANE SUITE 1	
City-State-Zip:	JUPITER FL 33458	City-State-Zip:	JUPITER FL 33458	

s this statement for the purpose of changing its regist	ered onice of regis	lered agent, or both, in the State of Fiorida.	
c Signature of Registered Agent			[
I:			
	Title	D	

FILED Mar 22, 2013 Secretary of State CC7409582434

Certificate of Status Desired: No

03/22/2013 Date