

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723333

FILED  
Jan 17, 2012  
Secretary of State

**Entity Name:** MAYNARD CONDOMINIUM ASSOCIATION, INC

**Current Principal Place of Business:**

3026 ALHAMBRA ST  
FT. LAUDERDALE, FL 33304

**New Principal Place of Business:**

**Current Mailing Address:**

500 E. BROWARD BLVD.  
STE 1620  
FORT LAUDERDALE, FL 33394 US

**New Mailing Address:**

**FEI Number:** 59-1464375      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

JACOBSON, DANIEL A  
901 S. FEDERAL HWY  
STE 201  
FORT LAUDERDALE, FL 33316 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: TD  
Name: VISNICK, ARNOLD  
Address: 6001 FALLS CIRCLE DR.  
City-St-Zip: LAUDERHILL, FL

Title: P  
Name: JOHNSON, KAREN  
Address: 500 E. BROWARD BLVD STE 1620  
City-St-Zip: FORT LAUDERDALE, FL 33394

Title: VP  
Name: O'BEA, DENNIS  
Address: 1718 NE 26TH AVE  
City-St-Zip: FT LAUDERDALE, FL 33305

Title: S  
Name: SPOSA, CHRISTINE  
Address: 500 E. BROWARD BLVD., STE 1620  
City-St-Zip: FORT LAUDERDALE, FL 33394

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: KAREN JOHNSON

P

01/17/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date