

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742054

FILED  
Mar 11, 2009  
Secretary of State

Entity Name: THE PLAZAS MAINTENANCE ASSOCIATION, INC.

## Current Principal Place of Business:

5100 TOWN CENTER CIRCLE  
560  
BOCA RATON, FL 33486 US

## Current Mailing Address:

5100 TOWN CENTER CIRCLE  
560  
BOCA RATON, FL 33486 US

## New Principal Place of Business:

5355 TOWN CENTER ROAD  
202  
BOCA RATON, FL 33486 US

## New Mailing Address:

5355 TOWN CENTER ROAD  
202  
BOCA RATON, FL 33486 US

FEI Number: 59-1892913

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 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: PD ( ) Delete  
Name: ERICKSON, R. MICHAEL  
Address: 5355 TOWN CENTER RD. #701  
City-St-Zip: BOCA RATON, FL 33486

Title: STD ( ) Delete  
Name: BELL, KATHLEEN T.  
Address: 5100 TOWN CENTER CIRCLE # 560  
City-St-Zip: BOCA RATON, FL 33486

Title: VPD ( ) Delete  
Name: FLANAGAN, JOSEPH P  
Address: 5100 TOWN CENTER CIRCLE # 560  
City-St-Zip: BOCA RATON, FL 33486

Title: D ( ) Delete  
Name: GROMANN, GLENN E  
Address: 5295 TOWN CENTER ROAD, #200  
City-St-Zip: BOCA RATON, FL 33486

Title: D (X) Delete  
Name: MILLIKEN, LORRAINE  
Address: 5100 TOWN CENTER CIRCLE # 560  
City-St-Zip: BOCA RATON, FL 33486

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: ERICKSON, MICHAEL R  
Address: 5355 TOWN CENTER RD. #701  
City-St-Zip: BOCA RATON, FL 33486

Title: VPD (X) Change ( ) Addition  
Name: SANDBERG, SCOTT  
Address: 101 E. KENNEDY BLVD, SUITE 2330  
City-St-Zip: TAMPA, FL 33602

Title: STD (X) Change ( ) Addition  
Name: ORTIZ, ELSIE AREM  
Address: 5355 TOWN CENTER ROAD, SUITE 202  
City-St-Zip: BOCA RATON, FL 33486

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: ELSIE ORTIZ

STD

03/11/2009

Electronic Signature of Signing Officer or Director

Date