2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745227

Apr 20, 2009 Secretary of State

Entity Name: MOODY PLACE CONDOMINIUM, INC. **Current Principal Place of Business: New Principal Place of Business:** 1011 S. MOODY AVE., #12 TAMPA, FL 33629 **Current Mailing Address: New Mailing Address:** 1011 S. MOODY AVE., #12 TAMPA, FL 33629 FEI Number: 59-1888268 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NORRIS, TERESA 1011 S. MOODY AVE., #22 TAMPA, FL 33629 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ARUNDAR, AMANDA J Name: Name: Address: 1011 S. MOODY AVE., #14 Address: City-St-Zip: TAMPA, FL 33629 City-St-Zip: Title: () Delete Title: () Change () Addition TIPTON, DOUG CPA Name: Name: Address: 610 S BOULEVARD Address: City-St-Zip: TAMPA, FL 33609 City-St-Zip: Title: () Delete Title: () Change () Addition NORRIS, TERESA Name: Name: 1011 S. MOODY AVE., #22 Address: Address: City-St-Zip: TAMPA, FL 33629 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.

Ρ SIGNATURE: TERESA NORRIS 04/20/2009