

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748767

FILED
Mar 04, 2009
Secretary of State

Entity Name: EASTRIDGE PROFESSIONAL PLAZA OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2020 WEST MCNAB ROAD
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

2020 WEST MCNAB ROAD
S-101
FORT LAUDERDALE, FL 33309

Current Mailing Address:

2020 WEST MCNAB ROAD
FORT LAUDERDALE, FL 33309

New Mailing Address:

2020 WEST MCNAB ROAD
S-101
FORT LAUDERDALE, FL 33309

FEI Number: 59-2264127

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FEHLHABER, ROBERT F.
2020 W. MCNAB ROAD
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

FEHLHABER, ROBERT F.
2020 W. MCNAB ROAD
S-101
FORT LAUDERDALE, FL 33309 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:

03/04/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FEHLHABER, ROBERT F.,
Address: 2020 W. MCNAB ROAD
City-St-Zip: FT. LAUDERDALE, FL

Title: D () Delete
Name: FEHLHABER, JULIANA,
Address: 2020 W. MCNAB RD.
City-St-Zip: FT. LAUDERDALE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FEHLHABER, ROBERT F.,
Address: 2020 W. MCNAB ROAD S-101
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: D (X) Change () Addition
Name: FEHLHABER, JULIANA,
Address: 2020 W. MCNAB RD. S-101
City-St-Zip: FT. LAUDERDALE, FL 33309

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: ROBERT F. FEHLHABER

PRES

03/04/2009

Electronic Signature of Signing Officer or Director

Date