

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751177

FILED
Feb 18, 2009
Secretary of State

Entity Name: THE PLAZA OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

221-223 COLUMBIA DRIVE
CAPE CANAVERAL, FL 32920

New Principal Place of Business:

Current Mailing Address:

221-223 COLUMBIA DRIVE
CAPE CANAVERAL, FL 32920

New Mailing Address:

FEI Number: 59-2231169

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLAGSHIP ASSOCIATION MANAGEMENT ENTERPRISE
102 COLUMBIA DRIVE, #204
CAPE CANAVERAL, FL 32920 US

Name and Address of New Registered Agent:

DOING ASSOCIATION BUSINESS, INC
221-223 COLUMBIA DR OFFICE
CAPE CANAVERAL, FL 32920 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: DOING ASSOCIATION BUSINESS, INC

02/18/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: DRUCQUER, PENNY
Address: 221 COLUMBIA DR., #342
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: PD () Delete
Name: CLEARY, JOHN
Address: 221 COLUMBIA DR., #239
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: S () Delete
Name: BALLANTINE, ANN
Address: 221 COLUMBIA DR., #144
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: TD () Delete
Name: BRANG, RUSSEL
Address: 233 COLUMBIA DRIVE #303
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: D () Delete
Name: LIPOWITZ, KEN
Address: 223 COLUMBIA DR 115
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: D () Delete
Name: KANAPICKI, FRANK
Address: 221 COLUMBIA DR 225
City-St-Zip: CAPE CANAVERAL, FL 32920

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: CLEARY, JOHN
Address: 221 COLUMBIA DR., #239
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PENNY DRUCQUER

VP

02/18/2009

Electronic Signature of Signing Officer or Director

Date