

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754722

FILED
Mar 17, 2009
Secretary of State

Entity Name: JUSTIN PLACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

621 CATHCART ST.
UNITS 1-10
ORLANDO, FL 32803 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 536293
ORLANDO, FL 328536293 US

New Mailing Address:

FEI Number: 59-2233489

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENKE, SCOTT
621 N CATHCART
4
ORLANDO, FL 32803 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: P () Delete
Name: HALL, ART
Address: 621 CATHCART AVE. #9
City-St-Zip: ORLANDO, FL 32803

Title: T () Delete
Name: BENKE, SCOTT
Address: 621 CATHCART AVE #4
City-St-Zip: ORLANDO, FL 32803

Title: VP () Delete
Name: SIGER, LARRY
Address: 621 N CATHCART AVE 6
City-St-Zip: ORLANDO, FL 32803

Title: D () Delete
Name: LAWING, KELLAN
Address: 621 N. CATHCART AVE. #7
City-St-Zip: ORLANDO, FL 32803

Title: D () Delete
Name: EDWARDS, TOM
Address: 621 N CATHCART AVE #8
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: STOCKSDALE, PAUL
Address: 621 CATHCART AVE. #1
City-St-Zip: ORLANDO, FL 32803

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

Title: VP (X) Change () Addition
Name: SIGER, LARRY
Address: 621 N CATHCART AVE #6
City-St-Zip: ORLANDO, FL 32803

Title: D (X) Change () Addition
Name: HALL, ART
Address: 621 N. CATHCART AVE. #9
City-St-Zip: ORLANDO, FL 32803

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: SCOTT BENKE

T

03/17/2009

Electronic Signature of Signing Officer or Director

Date