

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759184

FILED  
Jan 19, 2008  
Secretary of State

**Entity Name:** DOUGLAS PLACE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

DOUGLAS PLACE #201  
2181 LAKEVIEW DR  
SEBRING, FL 33870 US

**New Principal Place of Business:**

**Current Mailing Address:**

TERRY HARTIGH  
2029 ARBUCKLE CREEK RD. #24  
SEBRING, FL 33870 US

**New Mailing Address:**

**FEI Number:** 59-2265483

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HARTIGH, TERRY  
2029 ARBUCKLE CREEK RD. #24  
SEBRING, FL 33870 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: D ( ) Delete  
Name: HARTIGH, TERRY  
Address: 2029 ARBUCKLE CREEK RD. #24  
City-St-Zip: SEBRING, FL 33870 US

Title: D ( ) Delete  
Name: HARTIGH, TERRY  
Address: 2029 ARBUCKLE CREEK RD. #24  
City-St-Zip: SEBRING, FL 33870 US

Title: D ( ) Delete  
Name: HARTIGH, TERRY  
Address: 2029 ARBUCKLE CREEK RD. #24  
City-St-Zip: SEBRING, FL 33870 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: TERRY HARTIGH

D

01/19/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date