

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761335

FILED
May 01, 2009
Secretary of State

Entity Name: ONE LAUREL PLACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

201 W. LAUREL ST.
TAMPA, FL 336022924

New Principal Place of Business:

201 W. LAUREL ST.
TAMPA, FL 33602

Current Mailing Address:

201 W. LAUREL ST.
TAMPA, FL 336022924

New Mailing Address:

102 W. WHITING STREET
SUITE 501
TAMPA, FL 33602

FEI Number: 59-2168023 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

FERNANDEZ, KRISTOPHER E
114 S. FREMONT AVENUE
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

LIU PROPERTY MANAGEMENT, INC.
102 W. WHITING STREET
SUITE 501
TAMPA, FL 33602 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: JESSICA GAIL LIU

05/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: MCDONALD, EUGENE
Address: 201 W LAUREL ST #309
City-St-Zip: TAMPA, FL 33602

Title: D () Delete
Name: CLARK, ANDREW
Address: 201 W. LAUREL ST. PH3
City-St-Zip: TAMPA, FL 33602

Title: S (X) Delete
Name: MADDEN, JOHN
Address: 201 W. LAUREL ST. 412
City-St-Zip: TAMPA, FL 33602

Title: P () Delete
Name: NOBLE, ROGER
Address: 201 W. LAUREL ST. #602
City-St-Zip: TAMPA, FL 33602

Title: D (X) Delete
Name: SMITH, NORMAN
Address: 201 W LAUREL ST #709
City-St-Zip: TAMPA, FL 33602

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: CLARK, ANDREW
Address: 201 W. LAUREL ST. PH3
City-St-Zip: TAMPA, FL 33602

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: ROGER NOBLE

P

05/01/2009

Electronic Signature of Signing Officer or Director

Date