

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763472

FILED
Mar 27, 2009
Secretary of State

Entity Name: THE PEACHTREE BUILDING CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

425 W. COLONIAL DR
SUITE 301
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

425 W. COLONIAL DR
SUITE 301
ORLANDO, FL 32804

New Mailing Address:

FEI Number: 59-2998306

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, FRANK N JR
425 W. COLONIAL DR
SUITE 301
ORLANDO, FL 32804 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: PBM () Delete
Name: CURTIS, CLINTON
Address: 425 W COLONIAL DR #201
City-St-Zip: ORLANDO, FL 32804

Title: VBM () Delete
Name: MAUL, DAVID
Address: 425 W COLONIAL DR #303
City-St-Zip: ORLANDO, FL 32804

Title: SBM () Delete
Name: WOODS, JONATHAN
Address: 425 W COLONIAL DR #101
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SBM (X) Change () Addition
Name: PICCININI, KAREN
Address: 425 W COLONIAL DR #304
City-St-Zip: ORLANDO, FL 32804

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: KAREN PICCININI

SBM

03/27/2009

Electronic Signature of Signing Officer or Director

Date