

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765783

FILED
Jan 13, 2009
Secretary of State

Entity Name: PROFESSIONAL PLAZA CONDOMINIUM OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C DOUGLAS BRONSON
5300 S FL AVE UNIT 3
LAKELAND, FL 33813 US

New Principal Place of Business:

Current Mailing Address:

C DOUGLAS BRONSON
5300 S FL AVE UNIT 3
LAKELAND, FL 33813 US

New Mailing Address:

FEI Number: 59-2239280

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNAPP, STEPHEN M
5417 S FLORIDA AVE
LAKELAND, FL 33813 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: TDS () Delete
Name: BRONSON, DOUGLAS
Address: 5300 S FLORIDA AVE SUITE 3
City-St-Zip: LAKELAND, FL 33813

Title: VPD () Delete
Name: MULLIS, STEVE
Address: 5300 SOUTH FLA AVE SUITE 1
City-St-Zip: LAKELAND, FL 33813

Title: PD () Delete
Name: BRENNAMAN, DAN
Address: 5300 S FLA. AVE SUITE 4
City-St-Zip: LAKELAND, FL 33813

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: BRONSON, DOUGLAS
Address: 5300 S FLORIDA AVE SUITE 3
City-St-Zip: LAKELAND, FL 33813

Title: SD (X) Change () Addition
Name: SAWYER, PETE
Address: 5300 SOUTH FLA AVE SUITE 1
City-St-Zip: LAKELAND, FL 33813

Title: PD (X) Change () Addition
Name: BRENNAMAN, DAN
Address: 5302 S FLA. AVE STE 7
City-St-Zip: LAKELAND, FL 33813

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: C DOUGLAS BRONSON

TREA

01/13/2009

Electronic Signature of Signing Officer or Director

Date