

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 767087

**FILED**  
**Feb 21, 2011**  
**Secretary of State**

**Entity Name:** CROWN OAK CENTRE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

570 CROWN OAK CENTRE DR  
LONGWOOD, FL 32750

**New Principal Place of Business:**

**Current Mailing Address:**

1516 E. HILLCREST ST.  
STE. 210  
ORLANDO, FL 32803 US

**New Mailing Address:**

**FEI Number:** 59-2268730

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NATION, MARK  
570 CROWN OAK CENTRE DR  
LONGWOOD, FL 32750 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: TSD  
Name: CORCORAN, LEE  
Address: 410 CROWN OAK CENTRE DRIVE  
City-St-Zip: LONGWOOD, FL 32750

Title: P/D  
Name: NATION, MARK  
Address: 570 CROWN OAK CENTRE DRIVE  
City-St-Zip: LONGWOOD, FL 32750

Title: VP/D  
Name: WISE, MARIAN  
Address: 570 CROWN OAK CENTRE DRIVE  
City-St-Zip: LONGWOOD, FL 32750

I hereby 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 all other like empowered.

SIGNATURE: MARK NATION

P/D

02/21/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date