2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2009
Secretary of State

DOCUMENT# 768265

Entity Name: OFFICE IN THE PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

7355 S.W. 87 AVE.
STE 300
MIAMI, FL 33173 US

New Principal Place of Business:

Current Mailing Address:

7355 S.W. 87 AVE.
STE 300
MIAMI, FL 33173 US

New Mailing Address:

FEI Number: 59-2325229 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAY, BRYAN P
7355 S.W. 87 AVE.
STE 300
MIAMI, FL 33173 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: PIREZ, GEORGE
Address: 7315 SW 87TH AVE SUITE 100
City-St-Zip: MIAMI, FL 33173

Title: TSD ( ) Delete
Name: DAY, KATHLEEN
Address: 7355 S.W. 87 AVE - #300
City-St-Zip: MIAMI, FL 33173

Title: PD ( ) Delete
Name: DAY, BRYAN P
Address: 7355 SW 87 AVE - #300
City-St-Zip: MIAMI, FL 33173

Title: D ( ) Delete
Name: PIREZ, MARIA
Address: 7315 SW 87 AVE STE 100
City-St-Zip: MIAMI, FL 33173

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:

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: BRYAN P. DAY PD 03/17/2009

Electronic Signature of Signing Officer or Director — Date