

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004943

FILED
Jan 13, 2009
Secretary of State

Entity Name: CAREER BUILDING CONDOMINIUM OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

COMMUNITY PROPERTY MANAGEMENT, INC.
1815 MICCOSUKEE COMMONS DR, SUITE 104
TALLAHASSEE, FL 32308

New Principal Place of Business:

313 WILLIAMS STREET
SUITE #6
TALLAHASSEE, FL 32303

Current Mailing Address:

P.O. BOX 14019
TALLAHASSEE, FL 32317

New Mailing Address:

313 WILLIAMS STREET
SUITE #6
TALLAHASSEE, FL 32303

FEI Number: 59-3272371

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAUGHTY, TAMMY S
COMMUNITY PROPERTY MANAGEMENT, INC.
1815 MICCOSUKEE COMMONS DR, SUITE 104
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

WILLIAMSON, JERRY D JR.
313 WILLIAMS STREET
SUITE #6
TALLAHASSEE, FL 32303 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: JERRY D. WILLIAMSON, JR.

01/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CRAWFORD, ROGER
Address: 313 WILLIAMS ST. #4
City-St-Zip: TALLAHASSEE, FL 32303

Title: STD () Delete
Name: WILLIAMSON, JERRY
Address: 313 WILLIAMS ST SUITE 1
City-St-Zip: TALLAHASSEE, FL 32303

Title: VP (X) Delete
Name: GOBER, AARON
Address: 313 WILLIAMS ST. #2
City-St-Zip: TALLAHASSEE, FL 32303

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GOBER, AARON
Address: 313 WILLIAMS ST. #2
City-St-Zip: TALLAHASSEE, FL 32303

Title: STD (X) Change () Addition
Name: WILLIAMSON, JERRY
Address: 313 WILLIAMS ST SUITE 6
City-St-Zip: TALLAHASSEE, FL 32303

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: JERRY D. WILLIAMSON, JR.

STD

01/13/2009

Electronic Signature of Signing Officer or Director

Date