

2002 UNIFORM BUSINESS REPORT (UBR)

3/

FILED
Apr 23, 2002 8:00 am
Secretary of State

03-25-2002 90040 032 ****61.25

DOCUMENT # N00304

1. Entity Name

EXECUTIVE CENTER PLAZA OFFICE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

400 EXECUTIVE CENTER DR.
SUITE 206
WEST PALM BEACH FL 33401
US

400 EXECUTIVE CENTER DR.
SUITE 206
WEST PALM BEACH FL 33401
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1279406

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROBINSON, HARRY D.
400 EXECUTIVE CENTER DRIVE
SUITE 206
WEST PALM BEACH FL 33401

Name

Thomas P. Floyd

Street Address (P.O. Box Number is Not Acceptable)

400 Executive Center Drive

City

West Palm Beach

FL

Zip Code

33401

8. 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

Thomas P. Floyd

3/11/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

☐

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
FLOYD, DR. THOMAS
400 EXECUTIVE CENTER DRIVE, SUITE 105
WEST PALM BEACH FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
DURRANCE, DALLAS
400 EXECUTIVE CENTER DR #107
WEST PALM BEACH FL 33401 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
MASSEY, H W JR
400 EXECUTIVE CENTER DR #205
WEST PALM BEACH FL 33401 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
ROBINSON, HARRY D
400 EXECUTIVE CENTER DR #30+
WEST PALM BEACH FL 33401 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
GOODMARK, JERRY
400 EXECUTIVE CENTER DRIVE, SUITE 110
WEST PALM BEACH FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HUGHES, CLAUDIA
400 EXECUTIVE CENTER DR #207
WEST PALM BEACH FL 33401 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Thomas P. Floyd (Thomas P. Floyd)

Thomas P. Floyd (Thomas P. Floyd)

CR2E037 (9/01)