

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003569

FILED
Mar 12, 2009
Secretary of State

Entity Name: MALL HILL CENTER PROPERTY OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

30100 TELEGRAPH ROAD
SUITE 366
BINGHAM FARMS, MI 48025

New Principal Place of Business:

Current Mailing Address:

711 S. ORANGE AVE
SUITE 1
SARASOTA, FL 34236

New Mailing Address:

FEI Number: 59-3722175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAGLIONE, STEPHEN
711 S. OSPREY AVE.
SARASOTA, FL 34236 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: P () Delete
Name: BURTON, PETER
Address: 30100 TELEGRAPH ROAD, SUITE 366
City-St-Zip: BINGHAM FARMS, MI 48025

Title: V () Delete
Name: GOSS, LAURENCE
Address: 30100 TELEGRAPH ROAD, SUITE 366
City-St-Zip: BINGHAM FARMS, MI 48025

Title: S () Delete
Name: KATZMAN, ROBERT
Address: 30100 TELEGRAPH ROAD, SUITE 366
City-St-Zip: BINGHAM FARMS, MI 48025

Title: T () Delete
Name: BENTLEY, STEVEN
Address: 30100 TELEGRAPH ROAD, SUITE 366
City-St-Zip: BINGHAM FARMS, MI 48025

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: PETER BURTON

P

03/12/2009

Electronic Signature of Signing Officer or Director

Date