2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003845

FILED Apr 16, 2009 Secretary of State

Entity Name: GOLDENROD BUSINESS PLAZA CONDOMINIUM ASSOCIATION, INC.

urrent P	rincipal Place	e of Business:	New Princ	ipal Place of Business:
	OLDENROD I D, FL 32807	RD. US		
urrent N	lailing Addres	ss:	New Maili	ng Address:
O BOX 4 VINTER F	755 PARK, FL 327	93 US		
El Number	: 13-4239168	FEI Number Applied For()	FEI Number Not Appl	licable () Certificate of Status Desired (
lame and	l Address of (Current Registered Agent:	Name and	Address of New Registered Agent:
688 N. G	ERNARD OLDENROD F D, FL 32807	RD. US		
	e named entity e of Florida.	submits this statement for the	purpose of changing i	ts registered office or registered agent, or b
the State	e of Florida.	submits this statement for the	purpose of changing i	ts registered office or registered agent, or b
the State	e of Florida. * RE:	submits this statement for the		ts registered office or registered agent, or b Date
n the State	e of Florida. * RE:	nic Signature of Registered Ag	ent	
the State IGNATUI FFICER: tte: ame: ddress:	e of Florida. RE: Electror S AND DIREC	nic Signature of Registered Ag T ORS:) Delete DINA DENROD RD.	ent	Date
the State IGNATUI FFICER ttle: ame: ddress: ity-St-Zip: ttle: ame: ddress:	e of Florida. RE: Electron S AND DIREC SD (BREWTON, EL 1660 N. GOLI ORLANDO, FL	nic Signature of Registered Age FTORS:) Delete DINA DENROD RD. 32807 US) Delete DARD DENROD RD.	ent ADDITION Title: Name: Address:	Date IS/CHANGES TO OFFICERS AND DIREC
the State	e of Florida. RE: Electron S AND DIREC SD (BREWTON, EL 1660 N. GOLI ORLANDO, FL PD (REILLY, BERN 1688 N. GOLI ORLANDO, FL	nic Signature of Registered Age FTORS:) Delete DINA DENROD RD. 32807 US) Delete ARD DENROD RD. 32807) Delete JBINE W	ent ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:	Date IS/CHANGES TO OFFICERS AND DIREC () Change () Addition

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: AUBINE DINGWELL VP 04/16/2009