

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02745

FILED
Jan 16, 2009
Secretary of State

Entity Name: THE COMMONS AT MAITLAND CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

ATTN: MR. ART ALLY
1055 MAITLAND CENTE COMMONS BLVD.
MAITLAND, FL 32751 US

New Principal Place of Business:

Current Mailing Address:

ATTN: MR. ART ALLY
1055 MAITLAND CENTE COMMONS BLVD.
MAITLAND, FL 32751 US

New Mailing Address:

FEI Number: 59-2508436

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLY, AUTHUR D
1055 MAITLAND CENTER COMMONS
MAITLAND, FL 32751 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: PD () Delete
Name: CUMMING, BRIAN
Address: 1059 MAITLAND CENTER COMMONS BLVD
City-St-Zip: MAITLAND, FL 32751

Title: VD () Delete
Name: BASTEN, WILLIAM J
Address: 1057 MAITLAND CENTER COMMONS BLVD
City-St-Zip: MAITLAND, FL 32751 US

Title: D () Delete
Name: ALLY, ART
Address: 1055 MAITLAND CENTER COMMONS BLVD
City-St-Zip: MAITLAND, FL 32751 US

Title: D () Delete
Name: WALKER, BERRY
Address: 1055 MAITLAND CENTER COMMONS BLVD
City-St-Zip: MAITLAND, FL 32751 US

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: ARTHUR D ALLY

D

01/16/2009

Electronic Signature of Signing Officer or Director

Date