

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000211

FILED  
Jan 22, 2009  
Secretary of State

**Entity Name:** THE CANAL PARK CENTER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1611 12TH ST EAST  
SUITE C  
PALMETTO, FL 34221

**New Principal Place of Business:**

**Current Mailing Address:**

1611 12TH ST EAST  
SUITE C  
PALMETTO, FL 34221

**New Mailing Address:**

FEI Number: 51-0482155

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MAYS, BASIL G  
1611 12TH ST EAST  
SUITE C  
PALMETTO, FL 34221 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: MAYS, BASIL G  
Address: 1611 12TH ST EAST SUITE C  
City-St-Zip: PALMETTO, FL 34221

Title: VP ( ) Delete  
Name: MACK, ROY  
Address: 1116 12TH ST EAST SUITE G  
City-St-Zip: PALMETTO, FL 34221

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: BASIL G. MAYS

PRES

01/22/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date