

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2008 8:00 am
Secretary of State

03-17-2008 90006 039 ****61.25

DOCUMENT # N03000006304																																																																																																																																																					
1. Entity Name METRO WEST EXECUTIVE PLAZA CONDOMINIUM ASSOCIATION, INC.																																																																																																																																																					
Principal Place of Business 1750 W. BROADWAY ST. #220 OVIEDO, FL 32765			Mailing Address PO BOX 620368 OVIEDO, FL 32762																																																																																																																																																		
2. Principal Place of Business - No P.O. Box # 1750 W. Broadway St. Suite, Apt. #, etc. Suite #220 City & State Oviedo, FL Zip 32765 Country USA		3. Mailing Address PO Box 620368 Suite, Apt. #, etc. City & State Oviedo, FL Zip 32762 Country USA		40046300 01112008 Chg-NP CR2E037 (12/06) 4. FEI Number 41-2108271 Applied For <input type="checkbox"/> Not Applicable																																																																																																																																																	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent DAVIS, KEVIN 1750 W. BROADWAY ST. #118 OVIEDO, FL 32765																																																																																																																																																	
7. Name and Address of New Registered Agent Name <u>Kevin Davis</u> Street Address (P.O. Box Number is Not Acceptable) <u>1750 W. Broadway Street</u> Suite #220 City <u>Oviedo</u> FL Zip Code <u>32762</u>				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. I am familiar with, and accept the obligations of registered agent. <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> SIGNATURE <small>Signature, typed or printed name of registered agent and title if applicable.</small> </div> <div style="width: 40%; text-align: right;"> DATE <u>2/5/08</u> </div> </div> <small>(NOTE: Registered Agent signature required when reinstating)</small>																																																																																																																																																	
Filing Fee is \$81.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees																																																																																																																																																	
Make check payable to Florida Department of State																																																																																																																																																					
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left; padding: 2px;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left; padding: 2px;">11. 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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Thomas Haselwood</u> Thomas Haselwood <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				DATE <u>3/6/08</u> DAYTIME PHONE # <u>407-521-1811</u>																																																																																																																																																	