

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007876

FILED  
Feb 22, 2012  
Secretary of State

**Entity Name:** EMERSON PLAZA ONE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

370 CENTERPOINTE CIRCLE, STE 1136  
ALTAMONTE SPRINGS, FL 32701

**New Principal Place of Business:**

401 CENTERPOINTE DRIVE, SUITE 1565  
ALTAMONTE SPRINGS, FL 32701

**Current Mailing Address:**

370 CENTERPOINTE CIRCLE, STE 1136  
ALTAMONTE SPRINGS, FL 32701

**New Mailing Address:**

PO BOX 160128  
ALTAMONTE SPRINGS, FL 32716

**FEI Number:** 32-0123374

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HANSON, JACK  
1600 WEST COLONIAL DRIVE  
ORLANDO, FL 32804 US

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

LUMPKIN, ELLEN  
461 A1A BEACH BLVD  
ST AUGUSTINE, FL 32080 US

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: ELLEN LUMPKIN

02/22/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: EMERSON, ERIC  
Address: 370 CENTERPOINTE CIRCLE, STE 1136  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: PRES  
Name: BURKE, GEORGE  
Address: 375 EMERSON PLAZA #415  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: TD  
Name: BIDDLE-SMITH, KATHRYN  
Address: 370 CENTERPOINTE CIRCLE, STE 1136  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: VP  
Name: PENLAND, PHILLIP  
Address: 375 EMERSON PLAZA, UNIT #914  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: STD  
Name: STEWART, LAWRENCE  
Address: 375 EMERSON PLAZA, UNIT #1115  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

I hereby 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 all other like empowered.

SIGNATURE: ELLEN LUMPKIN

RA

02/22/2012

Electronic Signature of Signing Officer or Director

Date