## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000010026

Entity Name: WINTHROP OFFICE CONDOMINIUM ABC, INC.

FILED Jan 0<u>2, 200</u>8 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

1206 MILLENNIUM PKWY, STE 2000 6152 DELANCEY STATION STREET

BRANDON, FL 33511 SUITE 205

RIVERVIEW, FL 33578

**Current Mailing Address: New Mailing Address:** 

1206 MILLENNIUM PKWY, STE 2000 6152 DELANCEY STATION STREET

BRANDON, FL 33511 SUITE 205

RIVERVIEW, FL 33578

FEI Number: 20-1151350 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SULLIVAN, JOHN E LASMAN, JEFFREY M

1206 MILLENNIUM PKWY, STE 2000 6152 DELANCEY STATION ST.

BRANDON, FL 33511 SUITE 205

RIVERVIEW, FL 33578 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: JEFFREY M. LASMAN 01/02/2008

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**PVST** (X) Change ( ) Addition () Delete SULLIVAN, JOHN E PARRISH, CARLENER Name: Name:

1206 MILLENNIUM PKWY, STE 2000 Address: 6152 DELANCEY STATION ST. Address:

City-St-Zip: BRANDON, FL 33511 City-St-Zip: RIVERVIEW, FL 33578

Title: Title: ( ) Change (X) Addition ( ) Delete Name: Name: MASSARO, JOSEPH JOHN Address: Address: 6152 DELANCEY STATION ST. City-St-Zip: City-St-Zip: RIVERVIEW, FL 33578

Title: () Delete Title: ( ) Change (X) Addition

LUTHER, SUSAN H Name: Name:

6152 DELANCEY STATION ST. Address: Address: City-St-Zip: City-St-Zip: RIVERVIEW, FL 33578

Title: () Delete Title: ( ) Change (X) Addition

Name: ATKINS, WILLIAM

Name: 6152 DELANCEY STATION ST. Address: Address: City-St-Zip: City-St-Zip: RIVERVIEW, FL 33578

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: WILLIAM ATKINS S 01/02/2008