

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03038

FILED
Jan 16, 2009
Secretary of State

Entity Name: WAREHOUSING SQUARE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

10267 DEVONSHIRE LAKE DRIVE
TAMPA, FL 33647 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 929
MANGO, FL 33550 US

New Mailing Address:

FEI Number: 59-2459461

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENNIG, ROBERT
10267 DEVONSHIRE LAKE DR
TAMPA, FL 33647 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: SHEMANSKY, ROBERT J.,
Address: 5004 PRESIDENTIAL ST.
City-St-Zip: SEFFNER, FL 33584

Title: SD () Delete
Name: PHILLIPS, STEVEN,
Address: 2825 PARKWAY ST., #3
City-St-Zip: LAKELAND, FL 33811

Title: TD () Delete
Name: HENNIG, ROBERT,
Address: 10267 DEVONSHIRE LAKE DR
City-St-Zip: TAMPA, FL 33647

Title: VD () Delete
Name: GILMAN, JOHN
Address: 1731 JOHN ARTHUR WAY
City-St-Zip: LAKELAND, FL 33083

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: ROBERT HENNIG

TD

01/16/2009

Electronic Signature of Signing Officer or Director

Date