

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 24, 2006 8:00 am
Secretary of State

03-24-2006 90034 034 ****61.25

DOCUMENT # N03275

1. Entity Name

FLORIDA PLAZA OWNERSHIP ASSOCIATION, INC.



Principal Place of Business

601 N NEW YORK AVE
PO BOX 2066
WINTER PARK FL 32789

Mailing Address

601 N NEW YORK AVE
PO BOX 2066
WINTER PARK FL 32789



2. Principal Place of Business

12238 PARK AVE

3. Mailing Address

12238 PARK AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E037 (10/05)

City & State

WINDERMERE, FL

City & State

WINDERMERE, FL

4. FEI Number

59-2720686

Applied For

Not Applicable

Zip

34786

Country

USA

Zip

34786

Country

USA

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GARCIA, MANUEL A, III
601 N NEW YORK AVE
WINTER PARK FL 32789

Robert L. Kazaros
12238 PARK AVE
WINDERMERE, FL
34786

7. Name and Address of New Registered Agent

Name Robert L. KAZAROS

Street Address (P.O. Box Number is Not Acceptable)

12238 PARK AVE

City WINDERMERE

FL

Zip Code

34786

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.

SIGNATURE

Robert L. KAZAROS

Signature, typed or printed name of registered agent and title if applicable

Robert L. Kazaros

(NOTE: Registered Agent signature required when re-registering)

3/3/06

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PTD ☐ Delete
NAME GARCIA, M.A., III
STREET ADDRESS 601 N. NEW YORK AVE
CITY-ST-ZIP WINTER PARK FL

TITLE VD ☐ Delete
NAME GARCIA, CARMEN M
STREET ADDRESS 601 N. NEW YORK AVE
CITY-ST-ZIP WINTER PARK FL

TITLE STD ☐ Delete
NAME KAZAROS, ROBERT L.
STREET ADDRESS 12238 PARK AVE
CITY-ST-ZIP WINDERMERE FL 34786

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 Robert L. KAZAROS

3/15/06 402/421-1495