

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03480

FILED
Aug 26, 2009
Secretary of State

Entity Name: OCALA COMMERCE INDUSTRIAL PLAZA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2710 E SILVER SPRINGS BLVD
OCALA, FL 34470 US

New Principal Place of Business:

412 SE 25TH AVENUE
OCALA, FL 34471 US

Current Mailing Address:

2710 E SILVER SPRINGS BLVD
OCALA, FL 34470 US

New Mailing Address:

412 SE 25TH AVENUE
OCALA, FL 34471 US

FEI Number: 59-2555139 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GALARZA, STEPHANIE
2710 EAST SILVER SPRINGS BLVD
OCALA, FL 34470 US

Name and Address of New Registered Agent:

GALARZA, STEPHANIE
412 SE 25TH AVENUE
OCALA, FL 34471 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: _____

08/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KNOWLEN, KATHY
Address: 556 SILVER COURSE CIRCLE
City-St-Zip: OCALA, FL

Title: D () Delete
Name: FERRANTE, CHRISTINE
Address: 1540 SW 7TH RD
City-St-Zip: OCALA, FL 34474

Title: PD () Delete
Name: GLARZA, STEPHANIE
Address: 2710 E SILVER SPRINGS BLVD
City-St-Zip: OCALA, FL 34470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: GALARZA, STEPHANIE
Address: 412 SE 25TH AVENUE
City-St-Zip: OCALA, FL 34471

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: STEPHANIE GALARZA

PD

08/26/2009

Electronic Signature of Signing Officer or Director

Date