

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

04-20-2007 90085 027 ****61.24

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CLERK OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N04000002127			
1. Entity Name CORAL SPRINGS PROFESSIONAL CAMPUS MASTER ASSOCIATION, INC.			
Principal Place of Business C/O FLORIDA TRUST REALTY, INC. 210 N. UNIVERSITY DR., STE. 200 CORAL SPRINGS, FL 33071		Mailing Address C/O FLORIDA TRUST REALTY, INC. 210 N. UNIVERSITY DR., STE. 200 CORAL SPRINGS, FL 33071	
2. Principal Place of Business - No P.O. Box # Integrity Property Mgmt		3. Mailing Address Integrity Property Mgmt	
Suite, Apt. #, etc. 953 University Dr.		Suite, Apt. #, etc. 953 University Dr.	
City & State Coral Springs FL		City & State Coral Springs FL	
Zip 33071		Country USA	
4. FEI Number 20-0810896		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent ROSEN, HARRY M ESQ 200 E. BROWARD BLVD. FORT LAUDERDALE, FL 33301		7. Name and Address of New Registered Agent Name Cynthia G Whittle Street Address (P.O. Box Number is Not Acceptable) 953 University Dr City Coral Springs FL Zip Code 33071	
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 Cynthia G Whittle DATE 4/17/07 (NOTE: Registered Agent signature required when re-registering)			
Filing Fee is \$81.25 Due by May 1, 2007		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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD RAPPAPORT, MARTIN 5521 N UNIVERSITY DR., #203 CORAL SPRINGS, FL 33067 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD BARTON, CHRIS 5471 N UNIVERSITY DR CORAL SPRINGS, FL 33067 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD MORSE, MINDY 5521 N UNIVERSITY DR., #201 CORAL SPRINGS, FL 33067 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Joe Ng Agent		Date 4/18/07 954 346 0677	