

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006450

FILED
Feb 04, 2009
Secretary of State

Entity Name: OFFICES AT VERANDA PARK BUILDING 1000 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2295 S. HIAWASSEE ROAD
SUITE 417
ORLANDO, FL 32835

New Principal Place of Business:

Current Mailing Address:

2295 S. HIAWASSEE ROAD
SUITE 417
ORLANDO, FL 32835

New Mailing Address:

FEI Number: 20-1282096

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMBACK, KEN
7065 WESTPOINTE BLVD, SUITE 319
ORLANDO, FL 32835 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: BURSHAN, SAMIR
Address: 2295 S. HIAWASSEE RD. SUITE 417
City-St-Zip: ORLANDO, FL 32835

Title: VD () Delete
Name: AMORE, GLENN
Address: 2295 S. HIAWASSEE RD. SUITE 417
City-St-Zip: ORLANDO, FL 32835

Title: D () Delete
Name: BODE, SVEN
Address: 2295 S. HIAWASSEE RD. SUITE 417
City-St-Zip: ORLANDO, FL 32835

Title: D () Delete
Name: PATEL, YATIN
Address: 2295 S. HIAWASSEE RD., SUITE 417
City-St-Zip: ORLANDO, FL 32835

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: SAMIR BURSHAN

P

02/04/2009

Electronic Signature of Signing Officer or Director

Date