

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 13, 2009  
Secretary of State**

DOCUMENT# N04000009279

Entity Name: TOWN CENTER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5401 S. KIRKMAN ROAD  
SUITE 450  
ORLANDO, FL 32819

**New Principal Place of Business:**

**Current Mailing Address:**

5401 S. KIRKMAN ROAD  
SUITE 450  
ORLANDO, FL 32819

**New Mailing Address:**

FEI Number: 20-1686591      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

COMMUNITY MANAGEMENT PROFESSIONALS, INC.  
5401 S. KIRKMAN ROAD  
SUITE 450  
ORLANDO, FL 32819 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: P ( ) Delete  
Name: HEFNER, SCOTT  
Address: 902 WEST PARK DRIVE  
City-St-Zip: CELEBRATION, FL 34747

Title: T ( ) Delete  
Name: WOOLEY, JANETTE  
Address: 721 FRONT ST  
City-St-Zip: CELEBRATION, FL 34747

Title: S (X) Delete  
Name: BONA, WILLIAM  
Address: 403 CELEBRATION AVENUE  
City-St-Zip: CELEBRATION, FL 34747

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: CANTINO, JIM  
Address: 606 MARKET STREET #220  
City-St-Zip: CELEBRATION, FL 34747

Title: D (X) Change ( ) Addition  
Name: ELDREDGE, CHARLIE  
Address: 610 CAMPUS STREET #130  
City-St-Zip: CELEBRATION, FL 34747

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: JIM CANTINO

D

01/13/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date