

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009915

FILED
Apr 07, 2009
Secretary of State

Entity Name: CHARLESTON PLACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1731 NW 6TH ST.
STE A
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 14506
GAINESVILLE, FL 32604

New Mailing Address:

FEI Number: 20-1779251

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DBA FLORIDA COMMUNITY MGMT
1731 NW 6TH ST.
GAINESVILLE, FL 32609 US

Name and Address of New Registered Agent:

ED BAUR MANAGEMENT, INC.
1731 NW 6TH ST.
STE A
GAINESVILLE, FL 32609 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: HAL WHITTET

04/07/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KRAUSE, MORGAN
Address: 2295 NW 16TH TERRACE
City-St-Zip: GAINESVILLE, FL 32605

Title: S () Delete
Name: HURST, LAURA
Address: 2217 NW 16TH TERRACE
City-St-Zip: GAINESVILLE, FL 32605

Title: T () Delete
Name: MALINDA, DOOLEY
Address: 7973 MONTEREY BAY DRIVE
City-St-Zip: JACKSONVILLE, FL 32265

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KRAUSE, MORGAN
Address: 2295 NW 16TH TERRACE
City-St-Zip: GAINESVILLE, FL 32605 US

Title: D (X) Change () Addition
Name: HURST, LAURA
Address: 2217 NW 16TH TERRACE
City-St-Zip: GAINESVILLE, FL 32605 US

Title: T (X) Change () Addition
Name: MALINDA, DOOLEY
Address: 7973 MONTEREY BAY DRIVE
City-St-Zip: JACKSONVILLE, FL 32265 US

Title: S () Change (X) Addition
Name: KINIHIRO, EMILY
Address: 2273 NW 16TH TERRACE
City-St-Zip: GAINESVILLE, FL 32065 US

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: MORGAN KRAUSE

P

04/07/2009

Electronic Signature of Signing Officer or Director

Date