

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 06, 2008 8:00 am
Secretary of State

04-15-2008 90014 007 ****61.25

DOCUMENT # N04564 1. Entity Name MASA COMMERCIAL CENTER CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 1016 26TH AVE E BRADENTON FL 34208 US			Mailing Address P.O. BOX 5125 SUN CITY CTR FL 33571 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number NO-T APPLICABLE Applied For Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent COOK, SAM JR. 1601 US HWY S RUSKIN FL 33570	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code				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 _____ DATE _____ Signature, typed or printed name of registered agent and the applicable (NOTE: Registered Agent signature required when re-designing)					
FILE NOW: FEE IS \$61.25 Due By May 1, 2008		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 COOK, SAM 2930 LONGRIFLE DRIVE WIMAUMA FL 33598	☐ Delete			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	VPD CRAWFORD, PAUL INDEPENDENT ALUMINUM: 1016 B 26TH AVE E BRADENTON FL 34208	☒ Delete			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D STONEBEG, ERIC 820 - 3RD STREET, WEST BRADENTON FL 34209	☐ Delete			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	[Blank]	☐ Delete			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	[Blank]	☐ Delete			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	[Blank]	☐ Delete			
TITLE NAME STREET ADDRESS CITY- ST- ZIP	[Blank]	☐ Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 another like empowered.			SIGNATURE: <i>Sam Cook</i> <i>4/30/08</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		

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1ST MOORE CR2E037 (10/07)