

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002562

**FILED**  
**Mar 21, 2011**  
**Secretary of State**

**Entity Name:** MBA BUSINESS CENTER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

131 BUSINESS CENTER DRIVE STE B11  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1626  
ORMOND BEACH, FL 32175

**New Mailing Address:**

**FEI Number:** 20-4467426

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TUMBLESON, J. DOYLE  
150 SOUTH PALMETTO AVE STE A  
DAYTONA BEACH, FL 32114 US

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

TUMBLESON, J. DOYLE  
150 SOUTH PALMETTO AVE STE 300  
DAYTONA BEACH, FL 32114 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: \_\_\_\_\_

Electronic Signature of Registered Agent

03/21/2011

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: BLEDSOE, LORE L  
Address: 131 BUSINESS CENTER DRIVE STE B11  
City-St-Zip: ORMOND BEACH, FL 32174

Title: DV  
Name: BLEDSOE, J. RONNIE  
Address: 131 BUSINESS CENTER DRIVE STE B11  
City-St-Zip: ORMOND BEACH, FL 32174

Title: DST  
Name: COLEMAN, CATHY E  
Address: 131, BUSINESS CENTER DRIVE STE B11  
City-St-Zip: ORMOND BEACH, FL 32174

I hereby 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 all other like empowered.

SIGNATURE: LORE L. BLEDSOE

Electronic Signature of Signing Officer or Director

DP

03/21/2011

Date