

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004122

FILED
Apr 14, 2009
Secretary of State

Entity Name: PICKWICK CIRCLE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4411 SW 34TH ST
GAINESVILLE, FL 32608

New Principal Place of Business:

Current Mailing Address:

PO BOX 143086
GAINESVILLE, FL 32614

New Mailing Address:

FEI Number: 20-2718197

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNIVERSITY MANAGEMENT, INC.
2811 SW ARCHER RD.
ATTN: ROXANNE SLODZINSKI
GAINESVILLE, FL 32608 US

Name and Address of New Registered Agent:

UNIVERSITY MANAGEMENT, INC.
2811 SW ARCHER RD.
ATTN: ROXANNE GORE
GAINESVILLE, FL 32608 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: ROXANNE GORE

04/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: THOMAS, GARY
Address: 6003 NW 112TH PLACE
City-St-Zip: ALACHUA, FL 32615

Title: VS () Delete
Name: THOMAS, JEREMY
Address: 4411 34TH STREET, 1204
City-St-Zip: GAINESVILLE, FL 32608

Title: T () Delete
Name: THOMAS, KAREN
Address: 6003 NW 112TH PLACE
City-St-Zip: ALACHUA, FL 32615

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:

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: ROXANNE GORE

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04/14/2009

Electronic Signature of Signing Officer or Director

Date