## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N05000005444

FILED Apr 22, 2009 Secretary of State

Entity Name: MAPLEWOOD PROFESSIONAL CENTER PHASE V OFFICE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1931 & 1935 COMMERCE LANE JUPITER, FL 33458 **Current Mailing Address: New Mailing Address:** 1935 COMMERCE LANE SUITE #1 JUPITER, FL 33458 FEI Number: 20-2934981 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GONZALEZ, MARILOU 1935 COMMERCE LANE SUITE 1 JUPITER, FL 33458 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 Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MCNAMARA, JAMES J Name: Name: 1935 COMMERCE LANE, SUITE 1 Address: Address: City-St-Zip: JUPITER, FL 33458 City-St-Zip: Title: () Delete Title: () Change () Addition Name: GONZALEZ, MARILOU Name: Address: 1935 COMMERCE LANE, SUITE 1 Address: City-St-Zip: JUPITER, FL 33458 City-St-Zip: Title: () Delete Title: () Change () Addition RENFROE, ANDY Name: Name: 1935 COMMERCE LANE SUITE 1 Address: Address: City-St-Zip: JUPITER, FL 33458 US City-St-Zip: Title: ( ) Delete Title: (X) Change ( ) Addition SLOAN, NANCY Name: Name: SLOANE, NANCY 1935 COMMERCE LANE SUITE 1 1935 COMMERCE LANE SUITE 1 Address: Address: City-St-Zip: JUPITER, FL 33458 US City-St-Zip: JUPITER, FL 33458 US Title: ( ) Delete Title: (X) Change ( ) Addition ANDERSON, JIM ANDERSEN, JIM Name: Name: 1935 COMMERCE LANE SUITE 1 1935 COMMERCE LANE SUITE 1 Address: Address: City-St-Zip: JUPITER, FL 33458 City-St-Zip: JUPITER, FL 33458

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: MARILOU GONZALEZ VP 04/22/2009