

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Nov 20, 2009
Secretary of State**

DOCUMENT# N05000007901

Entity Name: MOSAIC AT MILLENIA CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**C/O MANAGEMENT OFFICE
3573 CONROY ROAD
ORLANDO, FL 32839 US**New Principal Place of Business:****Current Mailing Address:**C/O HUDSON REALTY CAPITAL
Z MARKET ST., 6TH AVE
PORTLAND, ME 04101 US**New Mailing Address:**

FEI Number: 27-0130479

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:KIRTLAND, MARLENE L ESQ
BECKER & POLIAKOFF, P.A.
2500 MAITLAND CENTER PKWY., STE. 209
MAITLAND, FL 32751 US**Name and Address of New Registered Agent:**

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:Title: PD () Delete
Name: ETZEL, STEVE
Address: C/O MGMT. OFFICE, 3573 CONROY ROAD
City-St-Zip: ORLANDO, FL 32839Title: TD () Delete
Name: DOLLE, CYNTHIA
Address: 3735 CONROY ROAD UNIT 2212
City-St-Zip: ORLANDO, FL 32839Title: D () Delete
Name: MATHEWS, CHARLES
Address: C/O MGMT. OFFICE, 3573 CONROY ROAD
City-St-Zip: ORLANDO, FL 32839**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PD (X) Change () Addition
Name: MONTGOMERY, MARK
Address: C/O MGMT. OFFICE, 3573 CONROY ROAD
City-St-Zip: ORLANDO, FL 32839Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: D (X) Change () Addition
Name: BURK, JEFF
Address: C/O MGMT. OFFICE, 3573 CONROY ROAD
City-St-Zip: ORLANDO, FL 32839

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: KATRINA LAFAY

MGR

11/20/2009

Electronic Signature of Signing Officer or Director

Date