

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002696

FILED  
Apr 28, 2008  
Secretary of State

**Entity Name:** FIVAY PROFESSIONAL CENTER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

13740 OFFICE PARK COURT  
HUDSON, FL 34667

**New Principal Place of Business:**

**Current Mailing Address:**

13740 OFFICE PARK COURT  
HUDSON, FL 34667

**New Mailing Address:**

13740 OFFICE PARK COURT  
SUITE A  
HUDSON, FL 34667

FEI Number: 20-4629626

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PATEL, RASHMI  
13740 OFFICE PARK COURT  
HUDSON, FL 34667 US

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

PATEL, RASHMI  
13740 OFFICE PARK COURT  
SUITE A  
HUDSON, FL 34667 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: RASHMI PATEL

04/28/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: PATEL, RASHMI  
Address: 13740 OFFICE PARK COURT  
City-St-Zip: HUDSON, FL 34667

Title: TD ( ) Delete  
Name: CHALAVARYA, GOPAL  
Address: 4738 GRAND BLVD SUITE E  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D ( ) Delete  
Name: PATEL, MUKESH  
Address: 13740 OFFICE PARK COURT  
City-St-Zip: HUDSON, FL 34667

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PSD (X) Change ( ) Addition  
Name: PATEL, RASHMI  
Address: 13740 OFFICE PARK COURT, SUITE A  
City-St-Zip: HUDSON, FL 34667

Title: TD (X) Change ( ) Addition  
Name: CHALAVARYA, GOPAL  
Address: 13740 OFFICE PARK COURT, SUITE C  
City-St-Zip: HUDSON, FL 34667

Title: D (X) Change ( ) Addition  
Name: PATEL, MUKESH  
Address: 13740 OFFICE PARK COURT, SUITE A  
City-St-Zip: HUDSON, FL 34667

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: RASHMI PATEL

PSD

04/28/2008

Electronic Signature of Signing Officer or Director

Date