

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 20, 2009  
Secretary of State**

DOCUMENT# N06000007385

**Entity Name:** NOB HILL PROFESSIONAL PLAZA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

633 SOUTH FEDERAL HIGHWAY  
8TH FLOOR  
FT LAUDERDALE, FL 33301

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 02-9010  
FT LAUDERDALE, FL 333029010

**New Mailing Address:**

FEI Number: 20-8328399      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MATTEL, HARVEY  
633 S FEDERAL HWY 8TH FLOOR  
FT LAUDERDALE, FL 33301 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: SCHMIDT, MARK L  
Address: 8320 W SUNRISE BLVD SUITE 204  
City-St-Zip: PLANTATION, FL 33322

Title: D ( ) Delete  
Name: SCHMIDT, CELIA  
Address: 8320 W SUNRISE BLVD SUITE 204  
City-St-Zip: PLANTATION, FL 33322

Title: VSD ( ) Delete  
Name: MATTEL, HARVEY  
Address: 633 S FEDERAL HWY 8TH FLOOR  
City-St-Zip: FT LAUDERDALE, FL 33301

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: FRIEDMAN, RONALD S  
Address: 10167 WEST SUNRISE BOULEVARD, 3RD FLOOR  
City-St-Zip: PLANTATION, FL 33322

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: HARVEY MATTEL

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

VSD

01/20/2009

\_\_\_\_\_  
Date