2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007441

FILED Jaņ 30, 2<u>00</u>9 Secretary of State

Entity Name: PLANTATION KEY OFFICE PARK MASTER PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

7340 SW 110 TERRACE

New Principal Place of Business:

8725 NW 18TH TERR STE 204 MIAMI, FL 33172

MIAMI, FL 33156

Current Mailing Address:

New Mailing Address:

8725 NW 18TH TERR STE 204

12973 SW 112 ST., #180

MIAMI, FL 33172

MIAMI, FL 33186

FEI Number: 20-5803011

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

() Delete

Name and Address of New Registered Agent:

DOUGLAS, PAUL

8725 NW 18TH TERR STE 204

DOUGLAS, PAUL 7340 SW 110 TERRACE

MIAMI, FL 33172

MIAMI, FL 33156

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:

01/30/2009

Electronic Signature of Registered Agent

FEI Number Applied For ()

Date

OFFICERS AND DIRECTORS:

Address:

(X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DOUGLAS, PAUL

Name:

Name: 8725 NW 18TH TERR STE 204 DOUGLAS, PAUL 7340 SW 110 TERRACE

Address: City-St-Zip: MIAMI, FL 33172

City-St-Zip: MIAMI, FL 33156

Title: VSTD () Delete Title: **VSTD** (X) Change () Addition

Name: DOUGLAS, NANCY Name: DOUGLAS, NANCY Address: 7340 SW 110 TERRACE

Address: 8725 NW 18TH TERR STE 204

City-St-Zip: MIAMI, FL 33156

City-St-Zip: MIAMI, FL 33172

> Title: Name:

() Change () Addition

Title: (X) Delete POLLARD, FORD Name:

Address: City-St-Zip:

8725 NW 18TH TERR STE 204 Address: City-St-Zip: MIAMI, FL 33172

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: PAUL DOUGLAS PD 01/30/2009