## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000007651

FILED Mar 03, 2009 Secretary of State

Entity Name: ESPLANADE AT TOWN CENTER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

921 N. PENNSYLVANIA AVENUE 10435 MIDTOWN PARKWAY

WINTER PARK, FL 32789 JAX, FL 32244

**Current Mailing Address: New Mailing Address:** 

921 N. PENNSYLVANIA AVENUE 10435 MIDTOWN PARKWAY

WINTER PARK, FL 32789 JAX, FL 32244

FEI Number: 20-1983752 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:

CORPORATION SERVICE COMPANY 1201 HAYS STREET

10435 MIDTOWN PARKWAY TALLAHASSEE, FL 323012525 US JAX, FL 32246

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.

SPENCER, BELINDA P MS.

SIGNATURE: BELINDA SPENCER 03/03/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete

BARRUS, CHARLES K KIMBALL, SETH MR Name: Name: 1110 NORTHCHASE PARKWAY SUITE 150 Address: 10435 MIDTOWN PARKWAY #235 Address:

MARIETTA, GA 30067 JAX. FL 32246

City-St-Zip: City-St-Zip:

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

ROLLO, MARK Name: OLLIFF, KAY MS. Name:

Address: 1110 NORTHCHASE PARKWAY SUITE 150 Address: 10435 MIDTOWN PARKWAY #249 City-St-Zip: MARIETTA, GA 30067 City-St-Zip: JAX, FL 32246

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

RAINEY, BARTOW Name: KINGSTONE, MONTE MR. Name: 1110 NORTHCHASE PARKWAY SUITE 150 10435 MIDTOWN PARKWAY #135 Address: Address:

City-St-Zip: MARIETTA, GA 30067 City-St-Zip: JAX. FL 32246

Title: () Delete Title: SEC ( ) Change (X) Addition

Name: Name: ZAHN, EDDIE MR.

10435 MIDTOWN PARKWAY #223 Address: Address:

City-St-Zip: City-St-Zip: JAX, FL 32246

Title: TRES () Delete Title: ( ) Change (X) Addition

NICHOLS, GARY MR. Name: Name:

10435 MIDTOWN PARKWAY #151 Address: Address:

City-St-Zip: City-St-Zip: JAX, FL 32246

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: MONTE KINGSTONE VP 03/03/2009