## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000009917

Apr 22, 2008 Secretary of State

Entity Name: THE PIEDMONT BUSINESS CONDOMINIUM ASSOCIATION, INC.

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

1435 E PIEDMONT DR SUITE 211 TALLAHASSEE, FL 32308

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

1435 E PIEDMONT DR SUITE 211 TALLAHASSEE, FL 32308

FEI Number: 20-5605202 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:

RICHMOND, RONALD R GRAVELLE, NORMAN E 1435 E PIEDMONT DR SUITE 211

1435 E PIEDMONT DR SUITE 211 TALLAHASSEE, FL 32308 TALLAHASSEE, FL 32308

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: NORMAN GRAVELLE 04/22/2008

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DS () Delete (X) Change ( ) Addition RUSSELL, TERRANCE GRAVELLE, NORMAN E Name: Name: 1435 E PIEDMONT DR SUITE 211 Address: 1435 E PIEDMONT DR SUITE 211 Address: City-St-Zip: TALLAHASSEE, FL 32308 City-St-Zip: TALLAHASSEE, FL 32308

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

GRAVELLE, NORMAN Name: Name: Address: 1435 E PIEDMONT DR SUITE 211 Address: City-St-Zip: TALLAHASSEE, FL 32308 City-St-Zip:

Title: DV () Delete Title: () Change () Addition

MCNEAL, REBECCA Name: Name: 1435 E PIEDMONT DR SUITE 211 Address: Address: City-St-Zip: TALLAHASSEE, FL 32308 City-St-Zip:

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

Name: RICHMOND, RONALD R Name: 1435 E PIEDMONT DR SUITE 211 Address: Address: City-St-Zip: TALLAHASSEE, FL 32308 City-St-Zip:

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

ROUSE, KENNETH Name: Name: 1435 E PIEDMONT DR SUITE 211 Address: Address: City-St-Zip: TALLAHASSEE, FL 32308 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: NORMAN GRAVELLE DS 04/22/2008