2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 09, 2007 8:00 am
Secretary of State
04-23-2007 90279 041 ****61.25

DOCUMENT # N06000010425

1. Entity Name
MAITLAND MASTER COMMUNITY ASSOCIATION, INC.

66020143

Principal Place of Business	Mailing Address
1735 MARKET ST., SUITE 4010 PHILADELPHIA, PA	1735 MARKET ST., SUITE 4010 PHILADELPHIA, PA

04122007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

4. FEI Number 45-0565006 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
KALEITA, GARY 215 N. EOLA DR. ORLANDO, FL 32801	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25 **Due by May 1, 2007**	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	**Make check payable to Florida Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D TOMAINO, JAMES 1735 MARKET ST., SUITE 4010 PHILADELPHIA, PA	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D COLBERT, DONNA 1735 MARKET ST., SUITE 4010 PHILADELPHIA, PA	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MYATT, ANDREA 1735 MARKET ST., SUITE 4010 PHILADELPHIA, PA	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: James J Tomaino Director 4-12-07 (215) 751-9600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

James J Tomaino

OASIS CONDOMINIUM, LLC ATTACHMENT Vendor # FLOSTA CHECK: 267161

GL Account #	Invoice #	Inv.Date	Description	Amount to Pay
5510-0 -	2007-COMM ASSOC	04/17/07	2007 REPORT	61.25
			TOTAL	61.25

6600 20143
#N0600001042J

Cleared bank 4/30/07

OASIS CONDOMINIUM, LLC
THE KLEIN COMPANY
1735 MARKET STREET
SUITE 4010
PHILADELPHIA, PA 19103

WACHOVIA BANK

3-50
310

NO: 267161

DATE	AMOUNT
04/19/07	**********$61.25

POWER CHECK

PAY SIXTY-ONE AND 25/100 DOLLARS

TO THE ORDER OF FLORIDA DEPARTMENT OF STATE

FILE COPY
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