## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000012239

FILED Apr 27, 2009 Secretary of State

Entity Name: 3727 GOLDENROD PROFESSIONAL OFFICE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1350 ORA	NGE AVE		385 DOUGLAS AVE		
100 WINTER PARK, FL 32789			3000 ALTAMONTE SPRIN	3000 ALTAMONTE SPRINGS, FL 32714	
Current Mailing Address:				New Mailing Address:	
	_		385 DOUGLAS AVE		
1350 ORANGE AVE 100			3000		
WINTER F	PARK, FL 327	89	ALTAMONTE SPRIN	GS, FL 32714	
FEI Number:	20-8926747	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
ATTWOOD PHILLIPS INC. 1350 ORANGE AVE			385 DOUGLAS AVE		
100 WINTER PARK, FL 32789 US			3000 ALTAMONTE SPRIN	ALTAMONTE SPRINGS, FL 32714 US	
	named entity of Florida.	submits this statement for the p	urpose of changing its registere	ed office or registered agent, or both,	
SIGNATURE:				04/27/2009	
	Electro	nic Signature of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	KATSUR, JAMI	BAY BLVD. SOUTH	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD ( GREENBERG, 3129 CECELIA APOPKA, FL (	NDR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	STD ( KATSUR, JUST 3628 ETHAN L ORLANDO, FL	ANE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	

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: JAMES KATSUR PRES 04/27/2009