

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 23, 2007 8:00 am
Secretary of State

07-23-2007 90038 016 ****61.25

DOCUMENT # N06000012397 1. Entity Name NABAVI SQUARE CONDOMINIUM ASSOCIATION, INC.																																					
Principal Place of Business 6801 WALLACE ROAD ORLANDO, FL 32819				Mailing Address 6801 WALLACE ROAD ORLANDO, FL 32819																																	
2. Principal Place of Business - No P.O. Box # 6750 TURKEY LAKE RD Suite, Apt. #, etc. STE 300		3. Mailing Address 6750 TURKEY LAKE RD Suite, Apt. #, etc. STE 300																																			
City & State ORLANDO, FL		City & State ORLANDO, FL		4. FEI Number 35-2291038																																	
Zip 32819		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																	
6. Name and Address of Current Registered Agent NABAVI, MICHAEL 6801 WALLACE ROAD ORLANDO, FL 32819				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 6750 TURKEY LAKE RD STE 300 City ORLANDO FL Zip Code 32819																																	
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: MICHAEL NABAVI, DIR. 7/20/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE</small>																																					
Filing Fee is \$61.25 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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																																	
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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: MICHAEL NABAVI 7/20/07 407-352-0025 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																					