2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2009
Secretary of State

DOCUMENT# N06000013041

Entity Name: SAN MARCO PLACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5955 T.G. LEE BLVD
STE 300
ORLANDO, FL 328224457

New Principal Place of Business:

6972 LAKE GLORIA BLVD
ORLANDO, FL 328093200

Current Mailing Address:

5955 TG LEE BLVD. SUITE 300
ORLANDO, FL 328224457

New Mailing Address:

6972 LAKE GLORIA BLVD
ORLANDO, FL 328093200

FEI Number: 20-8448158 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LELAND MANAGEMENT, INC.
5955 T.G. LEE BLVD
STE 300
ORLANDO, FL 328224457 US

Name and Address of New Registered Agent:

LELAND MANAGEMENT, INC.
6972 LAKE GLORIA BLVD
ORLANDO, FL 328093200 US

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: REBECCA FURLOW 04/21/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete
Name: BALANKY, MICHAEL F
Address: 1300 RIVERPLACE BLVD SUITE 400
City-St-Zip: JACKSONVILLE, FL 32207

Title: VSD ( ) Delete
Name: SOUTHERLAND, JAMES W JR
Address: 1300 RIVERPLACE BLVD SUITE 400
City-St-Zip: JACKSONVILLE, FL 32207

Title: D ( ) Delete
Name: FANNING, KRISTIN
Address: 1300 RIVERPLACE BLVD SUITE 400
City-St-Zip: JACKSONVILLE, FL 32207

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: BARBE, VICTOR J
Address: 1478 RIVERPLAVE BLVD #1007
City-St-Zip: JACKSONVILLE, FL 32207

Title: DVP (X) Change ( ) Addition
Name: TYLER, SIMEON
Address: 1478 RIVERPLACE BLVD. #1708
City-St-Zip: JACKSONVILLE, FL 32207

Title: DS (X) Change ( ) Addition
Name: KING, GABRIELLE
Address: 1478 RIVERPLACE BLVD. # 1206
City-St-Zip: JACKSONVILLE, FL 32207

Title: D ( ) Change (X) Addition
Name: WALLACE, ANNIKA
Address: 1478 RIVERPLACE BLVD. #2101
City-St-Zip: JACKSONVILLE, FL 32207

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: VICTOR BARBE DP 04/21/2009
Electronic Signature of Signing Officer or Director Date