

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Mar 30, 2012  
Secretary of State

DOCUMENT# N07000004676

**Entity Name:** PHASE II FLORIDA ATLANTIC UNIVERSITY RESEARCH AND DEVELOPMENT PARK MAINTENANCE ASSOCIATION, INC.

**Current Principal Place of Business:**

2300 CORPORATE BLVD., NW, STE. 238  
BOCA RATON, FL 33431

**New Principal Place of Business:**

**Current Mailing Address:**

2300 CORPORATE BLVD., NW, STE. 238  
BOCA RATON, FL 33431

**New Mailing Address:**

FEI Number: 26-2656811      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MACLAREN, LINDA O.  
798 S. FEDERAL HWY., STE. 100  
BOCA RATON, FL 33432 US

**Name and Address of New Registered Agent:**

MACLAREN, ROBERT I II  
798 S. FEDERAL HWY.  
SUITE 100  
BOCA RATON, FL 33432 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: ROBERT I. MACLAREN II      03/30/2012  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: GRAMM, KIMBERLY  
Address: 777 GLADES RD  
City-St-Zip: BOCA RATON, FL 33431

Title: D  
Name: DONAUDY, TOM  
Address: 777 GLADES RD  
City-St-Zip: BOCA RATON, FL 33431

Title: D  
Name: MAIER, LONNIE H  
Address: 3651FAU BLVD., #400  
City-St-Zip: BOCA RATON, FL 33431

Title: D  
Name: TRINKA, ROXANNA  
Address: 1400 N.W. 1ST COURT  
City-St-Zip: BOCA RATON, FL 33432

Title: D  
Name: LIVINGSTON, ALBERT S  
Address: 3600 FAU BLVD., #207  
City-St-Zip: BOCA RATON, FL 33431

Title: D  
Name: CHASE, DANA  
Address: 3600 FAU BLVD., #203  
City-St-Zip: BOCA RATON, FL 33431

I hereby 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 all other like empowered.

SIGNATURE: KIMBERLY GRAMM      PD      03/30/2012  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date