

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Aug 06, 2009**  
**Secretary of State**

DOCUMENT# N08000000181

**Entity Name:** 700 WEST MORSE CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**700 WEST MORSE BLVD.  
WINTER PARK, FL 32789**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 3240  
WINTER PARK, FL 32790**New Mailing Address:**700 WEST MORSE BLVD.  
SUITE 201  
WINTER PARK, FL 32789**FEI Number:** 26-1708264**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**CAMPBELL, RONALD D  
1351 RICHMOND RD.  
WINTER PARK, FL 32789 US**Name and Address of New Registered Agent:**PANZL, JOSEPH R  
700 WEST MORSE BLVD.  
SUITE 200  
WINTER PARK, FL 32789 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: JOSEPH R. PANZL

08/06/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: CAMPBELL, RONALD D  
Address: 1351 RICHMOND RD.  
City-St-Zip: WINTER PARK, FL 32789

Title: DST ( ) Delete  
Name: BARLEY, JOHN DAVID  
Address: 2021 E. WASHINGTON ST.  
City-St-Zip: ORLANDO, FL 32803

Title: D ( ) Delete  
Name: MATTHIAS, ROBERT C  
Address: 700 WEST MORSE BLVD., SUITE 201  
City-St-Zip: WINTER PARK, FL 32789

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: PRICE, DEAN C  
Address: 329 NORTH PARK AVE SUITE 300  
City-St-Zip: WINTER PARK, FL 32789

Title: DST (X) Change ( ) Addition  
Name: MISSIGMAN, PAUL M  
Address: 329 NORTH PARK AVE SUITE 300  
City-St-Zip: WINTER PARK, FL 32789

Title: DVP (X) Change ( ) Addition  
Name: MATTHIAS, ROBERT C  
Address: 700 WEST MORSE BLVD., SUITE 201  
City-St-Zip: WINTER PARK, FL 32789

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: ROBERT C MATTHIAS

DVP

08/06/2009

Electronic Signature of Signing Officer or Director

Date