

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000446

FILED
Mar 11, 2009
Secretary of State

Entity Name: MILL RUN PROFESSIONAL PLAZA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

19103 AVENUE BAYONNES
LUTZ, FL 33549

New Principal Place of Business:

4804 ROWAN ROAD
NEW PORT RICHEY, FL 34653

Current Mailing Address:

19103 AVENUE BAYONNES
LUTZ, FL 33549

New Mailing Address:

4804 ROWAN ROAD
NEW PORT RICHEY, FL 34653

FEI Number: 26-1904359

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUDOBA, STEPHEN M
101 EAST KENNEDY BOULEVARD, SUITE 3700
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: PATEL, SHODHAN DR.
Address: 19103 AVENUE BAYONNES
City-St-Zip: LUTZ, FL 33549

Title: DVS () Delete
Name: KHANT, RANCHHOD DR
Address: 50 BAHAMA CIRCLE
City-St-Zip: TAMPA, FL 33606

Title: D () Delete
Name: PATEL, KRUTIKA
Address: 19103 AVENUE BAYONNES
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: LOKESH, HARAVU DR.
Address: 4804 ROWAN ROAD
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: DVS (X) Change () Addition
Name: ROSARIO, CRISTOBAL DR.
Address: 4804 ROWAN ROAD
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: DT (X) Change () Addition
Name: AKRAM, SAHID DR.
Address: 4804 ROWAN ROAD
City-St-Zip: NEW PORT RICHEY, FL 34653

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: HARAVU LOKESH

PRES

03/11/2009

Electronic Signature of Signing Officer or Director

Date