2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008974

FILED May 01, 2009 Secretary of State

Entity Name: OFFICES AT VERANDA PARK BUILDING 1500 CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

7065 WESTPOINTE BOULEVARD 7065 WESTPOINTE BOULEVARD

SUITE 319 SUITE 318

ORLANDO, FL 32835 ORLANDO, FL 32835

Current Mailing Address: New Mailing Address:

7065 WESTPOINTE BOULEVARD 7065 WESTPOINTE BOULEVARD

SUITE 319 SUITE 318

ORLANDO, FL 32835 ORLANDO, FL 32835

FEI Number: 26-3508850 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

DUDLEY, ADAM DUDLEY, ADAM

7065 WESTPOINTE BOULEVARD 7065 WESTPOINTE BOULEVARD

SUITE 319 SUITE 318

ORLANDO, FL 32835 US ORLANDO, FL 32835 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: 05/01/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

AZZOUZ, KEVIN H AZZOUZ, KEVIN H Name: Name:

7065 WESTPOINTE BOULEVARD, SUITE 319 Address: 7065 WESTPOINTE BOULEVARD, SUITE 318 Address:

City-St-Zip: ORLANDO, FL 32835 City-St-Zip: ORLANDO, FL 32835

Title: () Delete Title: (X) Change () Addition

Name: DUDLEY, ADAM Name: DUDLEY, ADAM

Address: 7065 WESTPOINTE BOULEVARD, SUITE 319 Address: 7065 WESTPOINTE BOULEVARD, SUITE 318

City-St-Zip: ORLANDO, FL 32835 City-St-Zip: ORLANDO, FL 32835

Title: (X) Delete Title: () Change () Addition

GUERRIERO, KAREN Name: Name: 7065 WESTPOINTE BOULEVARD, SUITE 319 Address: Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip:

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: KEVIN H AZZOUZ D 05/01/2009

Electronic Signature of Signing Officer or Director

Date