

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000001849

FILED
Jan 06, 2012
Secretary of State

Entity Name: CARE DRIVE OFFICE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2580 CARE DRIVE
UNIT #4
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

8125 GLENMORE DRIVE
TALLAHASSEE, FL 32312

New Mailing Address:

FEI Number: 59-3656747

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORBIN, JANICE G
8125 GLENMORE DRIVE
TALLAHASSEE, FL 32312 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: PD
Name: POPE, MELVIN L III
Address: 2580 CARE DRIVE, SUITE #1
City-St-Zip: TALLAHASSEE, FL 32308

Title: VPST
Name: CORBIN, JANICE G
Address: 8125 GLENMORE DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: D
Name: CORBIN, DAVID L
Address: 2580 CARE DRIVE, SUITE 4
City-St-Zip: TALLAHASSEE, FL 32308

Title: D
Name: RYAN, TERRY
Address: 2580 CARE DRIVE, SUITE #2
City-St-Zip: TALLAHASSEE, FL 32308

Title: D
Name: EWING, GEORGE
Address: 2528 BARRINGTON CIRCLE, SUITE 1
City-St-Zip: TALLAHASSEE, FL 32308

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: JANICE G. CORBIN

VPST

01/06/2012

Electronic Signature of Signing Officer or Director

Date