2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14762

FILED Jun 24, 2009 Secretary of State

Entity Name: 530 EAST CENTRAL CONDOMINIUM ASSOCIATION, INC.

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

530 E CENTRAL BLVD. ORLANDO, FL 32801

Current Mailing Address: New Mailing Address:

530 E CENTRAL BLVD FRONT DESK ORLANDO, FL 32801 530 E CENTRAL BLVD ORLANDO, FL 32801

FEI Number: 59-2675494 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:

FIRST CAPITAL PROPERTY GROUP, INC.
120 EAST COLONIAL DR
FIRST CAPITAL PROPERTY GROUP, INC.
1516 E. HILLCREST STREET

ORLANDO, FL 32801 US SUITE 210
ORLANDO, FL 32803 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: 06/24/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 COCCHIARELLA, JOSEPH
 Name:
 COCCHIARELLA, JOSEPH

 Address:
 530 EAST CENTRAL #1605
 Address:
 530 EAST CENTRAL #1605

 City-St-Zip:
 ORLANDO, FL 32801
 City-St-Zip:
 ORLANDO, FL 32801

Title: T () Delete Title: T (X) Change () Addition Name: O'DONNELL, SIOBHAN Name: O'DONNELL, SIOBHAN

Address: 530 E. CENTRAL BLVD. STE 1902 Address: 530 E. CENTRAL BLVD. # 1902

City-St-Zip: ORLANDO, FL 32801 City-St-Zip: ORLANDO, FL 32801

Title: D () Delete Title: D (X) Change () Addition Name: PASHLEY, CHRIS Name: MEININGER, LEIGH

 Address:
 530 E. CENTRAL BLVD. #1002
 Address:
 530 E. CENTRAL BLVD. #1105

 City-St-Zip:
 ORLANDO, FL 32801
 City-St-Zip:
 ORLANDO, FL 32801

City-51-Zip: ORLANDO, PL 32801 City-51-Zip: ORLANDO, PL 3280

 $\label{eq:title:P} {\sf Title:} \qquad {\sf P} \qquad {\sf ()} \ {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf P} \qquad {\sf (X)} \ {\sf Change} \ {\sf ()} \ {\sf Addition}$

Name:REICH, THOMASName:REICH, THOMASAddress:530 E. CENTRAL BLVD. STE 9002Address:530 E. CENTRAL BLVD. # 902

City-St-Zip: ORLANDO, FL 32801 City-St-Zip: ORLANDO, FL 32801

 $\label{eq:title:S} {\sf Title:} \qquad {\sf S} \qquad {\sf (1) Delete} \qquad \qquad {\sf Title:} \qquad {\sf S} \qquad {\sf (X) Change (1) Addition}$

Name: JENNINGS, DEAN Name: JENNINGS, DEAN

 Address:
 530 E. CENTRAL BLVD. STE 805
 Address:
 530 E. CENTRAL BLVD. # 805

 City-St-Zip:
 ORLANDO, FL 32801
 City-St-Zip:
 ORLANDO, FL 32801

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: THOMAS REICH P 06/24/2009