

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14762

FILED
Apr 12, 2011
Secretary of State

Entity Name: 530 EAST CENTRAL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

530 E CENTRAL BLVD.
ORLANDO, FL 32801

New Principal Place of Business:

Current Mailing Address:

530 E CENTRAL BLVD.
ORLANDO, FL 32801

New Mailing Address:

FEI Number: 59-2675494

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIRST CAPITAL PROPERTY GROUP, INC.
1516 E. HILLCREST STREET
SUITE 210
ORLANDO, FL 32803 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: P
Name: COCCHIARELLA, JOSEPH
Address: 530 EAST CENTRAL # 1605
City-St-Zip: ORLANDO, FL 32801

Title: T
Name: MEININGER, LEIGH
Address: 530 E. CENTRAL BLVD. # 1105
City-St-Zip: ORLANDO, FL 32801

Title: D
Name: GAGLIARDI, RACHAEL
Address: 530 E. CENTRAL BLVD. # 1602
City-St-Zip: ORLANDO, FL 32801

Title: VP
Name: REID, ROY
Address: 530 E. CENTRAL BLVD. # 1801
City-St-Zip: ORLANDO, FL 32801

Title: S
Name: JENNINGS, DEAN
Address: 530 E. CENTRAL BLVD. # 805
City-St-Zip: ORLANDO, FL 32801

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: JOSEPH COCCHIARELLA

P

04/12/2011

Electronic Signature of Signing Officer or Director

Date