

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21765

FILED
May 03, 2008
Secretary of State

Entity Name: QUADRANGLE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

33940 WEYERHAEUSER WAY SOUTH
FEDERAL WAY, WA 98001

New Principal Place of Business:

6603 WEST BROAD STREET
RICHMOND, VA 23230

Current Mailing Address:

2200 LUCIEN WAY
STE 350
MAITLAND, FL 32751

New Mailing Address:

6603 WEST BROAD STREET
RICHMOND, VA 23230

FEI Number: 58-1864844 **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:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PTD () Delete
Name: MCARDLE, MICHAEL
Address: 2105 PARK AVENUE NORTH
City-St-Zip: WINTER PARK, FL 32789

Title: VPSD (X) Delete
Name: LIGHTSEY, ALTON
Address: 2105 PARK AVENUE NORTH
City-St-Zip: WINTER PARK, FL 32789

Title: D (X) Delete
Name: LIVINGSTON, GEORGE
Address: 2200 LUCIEN WAY #350
City-St-Zip: MAITLAND, FL 32751

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: NOTES (ND1), DBL
Address: 6603 WEST BROAD STREET
City-St-Zip: RICHMOND, VA 23230

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: CRYSTAL FICKEN

POA

05/03/2008

Electronic Signature of Signing Officer or Director

Date