

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 16, 2011
Secretary of State

DOCUMENT# N23389

Entity Name: BARCLAY LANE CONDOMINIUM OF TALLAHASSEE, A CONDOMINIUM ASSOCIATION INC.**Current Principal Place of Business:**191 PINE LANE
CRAWFORDVILLE, FL 32327 US**New Principal Place of Business:**1607 VILLAGE SQUARE BLVD
SUITE 8
TALLAHASSEE, FL 32309 US**Current Mailing Address:**PO BOX 3965
TALLAHASSEE, FL 32315 US**New Mailing Address:**PO BOX 13565
TALLAHASSEE, FL 32317 US**FEI Number:** 59-3323121**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ROJAS, KELLY
KELLY ASSOCIATION MANAGEMENT LLC
191 PINE LANE
CRAWFORDVILLE, FL 32327 US**Name and Address of New Registered Agent:**EDDY, MARIE
1607 VILLAGE SQUARE BLVD
SUITE 8
TALLAHASSEE, FL 32309 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: MARIE EDDY

06/16/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: HOYLE, ERIN
Address: 4553B BARCLAY LANE
City-St-Zip: TALLAHASSEE, FL 32309

Title: DVP
Name: OLIVER, ELLE
Address: 4557-C BARCLAY LANE
City-St-Zip: TALLAHASSEE, FL 32309

Title: DS
Name: VENSEL, RUTH
Address: 4549-B BARCLAY LANE
City-St-Zip: TALLAHASSEE, FL 32309

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: MARIE EDDY

MGR

06/16/2011

Electronic Signature of Signing Officer or Director

Date