

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000904

FILED
Apr 06, 2009
Secretary of State

Entity Name: MAYFAIR CONDOMINIUM IN PARK WEST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

3125 36TH ST N
SAINT PETERSBURG, FL 33715 US

New Principal Place of Business:

Current Mailing Address:

C/O RESOURCE PROPERTY MGMT
7300 PARK ST.
SEMINOLE, FL 33777 US

New Mailing Address:

FEI Number: 59-1727806 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

RESOURCE PROPERTY MANAGEMENT
7300 PARK ST
SEMINOLE, FL 33777 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 () Delete
Name: MOZZER, EDWIN
Address: 3125 36TH STREET NORTH, #306
City-St-Zip: ST PETERSBURG, FL 33713

Title: S/T () Delete
Name: EASON, CHERRYL
Address: 3125 36 STREET NORTH, #208
City-St-Zip: ST PETERSBURG, FL 33713

Title: VP () Delete
Name: CHAMBERLAIN, LAURA
Address: 3125 36TH ST N #308
City-St-Zip: SAINT PETERSBURG, FL 33713

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S/T (X) Change () Addition
Name: BRAIS, JAMES
Address: 3125 36 STREET NORTH, #306
City-St-Zip: ST PETERSBURG, FL 33713

Title: VP (X) Change () Addition
Name: REID, BARBARA
Address: 3125 36TH ST N #204
City-St-Zip: SAINT PETERSBURG, FL 33713

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: EDWIN MOZZER

P

04/06/2009

Electronic Signature of Signing Officer or Director

Date