## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N9400000824

FILED Feb 17, 2011 Secretary of State

Entity Name: NEWBERRY HILLS OFFICE CONDOMINIUM ASSN., INC.

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

500 NW 43RD STREET 7731-7733 W. NEWBERRY RD. 3 GAINESVILLE, FL 32607 US

GAINESVILLE, FL 32607 US

Current Mailing Address: New Mailing Address:

500 NW 43RD STREET P.O. BOX 143086

3 GAINESVILLE, FL 32614 US

GAINESVILLE, FL 32607 US

FEI Number: 59-3546802 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORNERSTONE PROPERTY SOLUTIONS
500 NW 43RD STREET
3 UNIVERSITY MANAGEMENT, INC.
2811 S.W. ARCHER RD.
OFFICE

GAINESVILLE, FL 32607 US GAINESVILLE, FL 32608 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: ROXANNE GORE 02/17/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: F

Name: SYLVIA, ANTONIO
Address: 11151 NE 123RD PLACE
City-St-Zip: ARCHER, FL 32618

Title: VP

 Name:
 ROGERS, AUBREY

 Address:
 2400 NW 6TH STREET

 City-St-Zip:
 GAINESVILLE, FL 32609

Title: ST

Name: BUSCH, DIANNE

Address: 7733 W NEWBERRY RD SUITE B-3

City-St-Zip: GAINESVILLE, FL 32607

Title: MGR

Name: UNIVERSITY MANAGEMENT, INC.

Address: P.O. BOX 143086 City-St-Zip: GAINESVILLE, FL 32614

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: ROXANNE GORE MGR 02/17/2011