2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2009
Secretary of State

DOCUMENT# N95000002622

Entity Name: TRACT 20 MITIGATION AREA ASSOCIATION, INC.

Current Principal Place of Business:

6300 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487 US

New Principal Place of Business:

Current Mailing Address:

6300 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487 US

New Mailing Address:

FEI Number: 65-0634710 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PRIME MANAGEMENT GROUP, INC
6300 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487 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: PD ( ) Delete
Name: BROWN, LENORA
Address: 301 W. CAMINO GARDENS BLVD., #200
City-St-Zip: BOCA RATON, FL 33432 US

Title: VD ( ) Delete
Name: FRANCUZ, GREG
Address: 301 W. CAMINO GARDENS BLVD., #200
City-St-Zip: BOCA RATON, FL 33432 US

Title: TD ( ) Delete
Name: FREIMYER, TAMMY
Address: 301 W. CAMINO GARDENS BLVD., #100
City-St-Zip: BOCA RATON, FL 33432 US

Title: SECT ( ) Delete
Name: CAPITENA, RONALD
Address: 6300 FARE OF COMMERCE BLVD
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: RONALD CAPTIVA P 04/07/2009

Electronic Signature of Signing Officer or Director — Date