

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002759

FILED
Feb 27, 2012
Secretary of State

Entity Name: MARUS CENTER OFFICE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

517 WEST AVE
CLERMONT, FL 34711 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 121104
CLERMONT, FL 34712 US

New Mailing Address:

P.O. BOX 121104
CLERMONT, FL 34712

FEI Number: 59-3336261

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMB, HOPE H
517 WEST AVE
CLERMONT, FL 34711 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
Name: LAMB, HOPE H
Address: P.O. BOX 121104
City-St-Zip: CLERMONT, FL 34712

Title: DVPD
Name: LAMB,III, JOHN T
Address: PO BOX 121104
City-St-Zip: CLERMONT, FL 34712

Title: D
Name: RUBENSTEIN, BARRY DDS
Address: 1000 EAST AVE
City-St-Zip: CLERMONT, FL 34711

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: HOPE LAMB

PD

02/27/2012

Electronic Signature of Signing Officer or Director

Date