

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 24, 2008 08:00 A
Secretary of State

DOCUMENT # N97000004082

1. Entity Name

MASON AVENUE PROFESSIONAL CORPORATION



Principal Place of Business

1517 MASON AVE UNIT SOUTH
DAYTONA BCH, FL 32114

Mailing Address

1517 MASON AVE UNIT SOUTH
DAYTONA BCH, FL 32114

DO NOT WRITE IN THIS SPACE



01142008 No Chg-NP

CR2E037 (4/06)

4. FEI Number

59-3466954

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MCCONNELL, HARRY G
444 SEABREEZE BLVD STE 900
DAYTONA BCH, FL 32118

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of, the registered agent.

SIGNATURE

[Handwritten Signature]

Signature of officer or director, or registered agent, as applicable

(If officer or director, signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME ROSENBERG, JEFFREY
STREET ADDRESS 1517 MASON AVE
CITY- ST- ZIP DAYTONA BEACH, FL 32117

TITLE D
NAME ROSENBERG, SANDRA
STREET ADDRESS 1517 MASON AVE
CITY- ST- ZIP DAYTONA BEACH, FL 32117

TITLE D
NAME ROSENBERG, BRETT A
STREET ADDRESS 1611 NW 12TH AVENUE
CITY- ST- ZIP MIAMI, FL 33136

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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01/25/08-80002-021 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Handwritten Signature: Jeffrey B. Rosenberg]
Date 1/20/08 386253341

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #