2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2009
Secretary of State

DOCUMENT# N99000005160

Entity Name: METROPOLITAN CENTRE II OFFICE CONDOMINIUM, INC.

Current Principal Place of Business:

1695 METROPOLITAN CIRCLE
SUITE 6
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 16005
TALLAHASSEE, FL 32317

New Mailing Address:

1695 METROPOLITAN CIRCLE
SUITE 6
TALLAHASSEE, FL 32308

FEI Number: 59-3634918 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DARIOTIS, TERRENCE T
1695 METROPOLITAN CIRCLE SUITE 6
TALLAHASSEE, FL 32308 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: DP ( ) Delete
Name: FERREN, ROBERT
Address: 1695 METROPOLITAN CIRCLE SUITE 7
City-St-Zip: TALLAHASSEE, FL 32308

Title: TD ( ) Delete
Name: DARIOTIS, TERRENCE T
Address: 1695 METROPOLITAN CIRCLE SUITE 6
City-St-Zip: TALLAHASSEE, FL 32308

Title: DV ( ) Delete
Name: TYCHSEN, PETER S
Address: 1695 METROPOLITAN CIRCLE, STE 1
City-St-Zip: TALLAHASSEE, FL 32308

Title: DS ( ) Delete
Name: BEAL, ARTHUR C JR
Address: 1695 METROPOLITAN CIRCLE, STE 5
City-St-Zip: TALLAHASSEE, FL 32308

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: TERRENCE T. DARIOTIS TD 03/16/2009

Electronic Signature of Signing Officer or Director — Date