

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005160

FILED
Mar 29, 2011
Secretary of State

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:

9101 SHOAL CREEK DRIVE
TALLAHASSEE, FL 32312

Current Mailing Address:

1695 METROPOLITAN CIRCLE
SUITE 6
TALLAHASSEE, FL 32308

New Mailing Address:

9101 SHOAL CREEK DRIVE
TALLAHASSEE, FL 32312

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:

FERREN, ROBERT S
9101 SHOAL CREEK DRIVE
TALLAHASSEE, FL 32312 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: ROBERT S. FERREN

03/29/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: FERREN, ROBERT S
Address: 9101 SHOAL CREEK DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: TD
Name: TYCHSEN, PETER S
Address: 1695 METROPOLITAN CIRCLE SUITE 1
City-St-Zip: TALLAHASSEE, FL 32308

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

Title: DS
Name: FERREN, ROBERT S
Address: 9101 SHOAL CREEK DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

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: ROBERT S. FERREN

DP

03/29/2011

Electronic Signature of Signing Officer or Director

Date