

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000003094

**FILED**  
**Jan 09, 2015**  
**Secretary of State**  
**CC3691990290**

**Entity Name:** UPTOWN PLACE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

911 N ORANGE AVE  
ORLANDO, FL 32801

**Current Mailing Address:**

911 N ORANGE AVE  
ORLANDO, FL 32801

**FEI Number: 05-0623642**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CONDOMINIUM CONCEPTS MANAGEMENT  
911 N ORANGE AVE  
ORLANDO, FL 32801 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:** LUCY BABON

01/09/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRES  
Name            SCOTT, JOHN  
Address        911 N ORANGE AVE  
City-State-Zip: ORLANDO FL 32801

Title            TREASURER  
Name            JACOBS, JAMES  
Address        911 N ORANGE AVE  
City-State-Zip: ORLANDO FL 32801

Title            DIRECTOR  
Name            AMO, JUAN  
Address        911 N ORANGE AVE  
City-State-Zip: ORLANDO FL 32801

Title            DIRECTOR  
Name            SORRENTINO, VINCENT  
Address        911 N ORANGE AVE  
City-State-Zip: ORLANDO FL 32801

Title            SECRETARY  
Name            SCOTT, LAURA  
Address        911 N ORANGE AVE  
City-State-Zip: ORLANDO FL 32801

*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:** JOHN SCOTT

**PRESIDENT**

01/09/2015

Electronic Signature of Signing Officer/Director Detail

Date