

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000002756

**Entity Name:** MANGONIA BUSINESS CENTER CONDOMINIUM  
ASSOCIATION, INC.

**FILED**  
**Apr 22, 2014**  
**Secretary of State**  
**CC7869102343**

**Current Principal Place of Business:**

4440 S. TIFFANY DRIVE  
UNITS 1-9  
MANGONIA PARK, FL 33407

**Current Mailing Address:**

1412 LAKE BASS DR.  
LAKE WORTH, FL 33461

**FEI Number: 02-0806922**

**Certificate of Status Desired: No**

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

HIBBERT, KAREN  
1412 LAKE BASS DRIVE  
LAKE WORTH, FL 33461 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title PD  
Name HIBBERT, KAREN  
Address 1412 LAKE BASS DR.  
City-State-Zip: LAKE WORTH FL 33461

Title VD  
Name MULLETT, MICHAEL  
Address 1412 LAKE BASS DR.  
City-State-Zip: LAKE WORTH FL 33461

Title STD  
Name HIBBERT, JAMES  
Address 1412 LAKE BASS DR.  
City-State-Zip: LAKE WORTH FL 33461

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: KAREN HIBBERT**

**PD**

**04/22/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date