

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002759

Entity Name: MARUS CENTER OFFICE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1010 EAST AVE
CLERMONT, FL 34711

Current Mailing Address:

P.O. BOX 121104
CLERMONT, FL 34712

FEI Number: 59-3336261

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAMB, HOPE H
1010 EAST AVE
CLERMONT, FL 34711 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 LAMB, HOPE H
Address P.O. BOX 121104
City-State-Zip: CLERMONT FL 34712

Title DVPD
Name LAMB,III, JOHN T
Address PO BOX 121104
City-State-Zip: CLERMONT FL 34712

Title D
Name RUBENSTEIN, BARRY DDS
Address 1000 EAST AVE
City-State-Zip: CLERMONT FL 34711

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: HOPE LAMB

PD

04/17/2014

Electronic Signature of Signing Officer/Director Detail

_____ Date