

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002174

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: THE 505 CONDOMINIUM, INC.

**Current Principal Place of Business:**

505 W OAK STREET  
KISSIMMEE, FL 34741

**New Principal Place of Business:**

505 W OAK STREET  
102  
KISSIMMEE, FL 34741

**Current Mailing Address:**

505 W OAK ST STE 102  
KISSIMMEE, FL 34741

**New Mailing Address:**

505 W OAK ST STE 102  
102  
KISSIMMEE, FL 34741

FEI Number: 59-3322217

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

OVERTON-MORGAN, IRENE  
505 W OAK ST STE 102  
KISSIMMEE, FL 34741 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: D ( ) Delete  
Name: OVERTON-MORGAN, IRENE P.A.  
Address: 5314 CORAL VINE LN  
City-St-Zip: KISSIMMEE, FL 34758

Title: D ( ) Delete  
Name: ATIQUZZAMAN, TAHSINA Y M.D.  
Address: 505 W. OAK ST., 202  
City-St-Zip: KISSIMMEE, FL 34741

Title: D ( ) Delete  
Name: GUINTO, AMELITA  
Address: 3876 PINE LAKES CIR  
City-St-Zip: STOCKTON, CA 95219

Title: D ( ) Delete  
Name: LOBER, CLIFFORD W MD  
Address: 3142 YATTIKA PL  
City-St-Zip: LONGWOOD, FL 32779

**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: IRENE OVERTON-MORGAN

D

04/30/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date