2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State
05-01-2006 90395 023 ****61.25

DOCUMENT # 718560

1. Entity Name
PARK LANE CONDOMINIUM ASSOCIATION OF JACKSONVILLE, INC.

Principal Place of Business	Mailing Address
1846 MARGARET ST JACKSONVILLE, FL 32204	1846 MARGARET ST JACKSONVILLE, FL 32204

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01182006 Chg-NP CR2E037 (11/05)

4. FEI Number 59-1633287 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BROWN, MARJORIE
1846 MARGARET ST 8-B
JACKSONVILLE, FL 32204

7. Name and Address of New Registered Agent

Name LANGENBACH, PATTI
Street Address (P.O. Box Number is Not Acceptable)
1846 MARGARET ST., 5-C
City JACKSONVILLE FL Zip Code 32204

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Patti Langenbach 4/27/06
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE
PATTI LANGENBACH, PRESIDENT

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BROWN, MARJORIE 1846 MARGARET ST., 8-B JACKSONVILLE, FL 32204	☒ Delete	D GERMANY, JANET 1846 MARGARET ST., 11-A JACKSONVILLE, FL. 32204	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD CHRISTIAN, KAREN 1846 MARGARET ST 9-C JACKSONVILLE, FL 32204	☒ Delete	SD SHUTT, JUDY 1846 MARGARET ST. 7-C JACKSONVILLE, FL. 32204	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HYMAN, FLO 1846 MARGARET ST 1B JACKSONVILLE, FL 32204	☐ Delete	VD HYMAN, FLO 1846 MARGARET ST. 1-B JACKSONVILLE, FL. 32204	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD LIPPS, SAM 1846 MARGARET ST 4C JACKSONVILLE, FL 32204	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD LANGENBACH, PATTI 1846 MARGARET ST 5-C JACKSONVILLE, FL 32204	☐ Delete	PD LANGENBACH, PATTI 1846 MARGARET ST. 5-C JACKSONVILLE, FL. 32204	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William S. Lipps WILLIAM S. LIPPS, TEXAS 4/27/06 (904) 388-5211
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #