2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725878

FILED Jan 19, 2006 Secretary of State

Entity Name: CONCORD VILLAGE SOUTH CONDOMINIUM ASSOCIATION NO. 3, INC.

Current Principal Place of Business: New Principal Place of Business: 930/970/1020 85TH AVE N ST. PETERSBURG, FL 33702 US **Current Mailing Address: New Mailing Address:** 970-85 AVE. NO ST. PETERSBURG, FL 33702 US FEI Number: 59-1676715 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GANCI, VI PD 970-85 AVENUE NO. # 115 ST, PETERSBURG, FL 33702 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition GANCI, VI JONES, PHYLLIS Name: Name: 970 85TH AVE. N. #115 Address: 1020 85TH AVE. N. #118 Address: City-St-Zip: ST PETERSBURG, FL 33702 City-St-Zip: ST PETERSBURG, FL 33702 Title: VPD Title: VPD () Delete (X) Change () Addition RAMOS, DIANE Name: GANCI, VI Name: Address: 930 85TH AVE. N. #101 Address: 970 85TH AVE. N. #115 City-St-Zip: ST PETERSBURG, FL 33702 City-St-Zip: ST PETERSBURG, FL 33702 Title: () Delete Title: () Change () Addition GOLDIE, DONNA Name: Name: Address: 1020 85TH AVE. N. #121 Address: City-St-Zip: ST. PETERSBURG, FL 33702 City-St-Zip: Title: TD () Delete Title: () Change () Addition Name: KARMAN, BETTY Name: Address: 970 85TH AVE. N. #212 Address: City-St-Zip: ST. PETERSBURG, FL 33702 City-St-Zip: Title: () Delete Title: () Change () Addition WITTE, GLADYS Name: Name: 930 85TH AVE. N. #405 Address: Address: City-St-Zip: ST. PETERSBURG, FL 33702 City-St-Zip: Title: (X) Delete Title: () Change () Addition GANCI, VI Name: Name: Address: 970 85TH AVE. N. #115 Address: ST. PETERSBURG, FL 33702 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: VI GANCI VPD 01/19/2006