2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2006
Secretary of State

DOCUMENT# 738309

Entity Name: RG CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2180 W STATE RD 434
#5000
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

2180 W STATE RD 434
#5000
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 59-1755618 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HART, JAMES W
SENTRY MANAGEMENT, INC.
2180 W SR 434, SUITE 5000
LONGWOOD, FL 32779 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:	PD	( ) Delete
Name:	MAY, BARBARA	
Address:	4172 PLAYER CIR	
City-St-Zip:	ORLANDO, FL 32804	
Title:	VPD	( ) Delete
Name:	KNIGHT, STEVE	
Address:	4228 PLAYER CIR	
City-St-Zip:	ORLANDO, FL 32808	
Title:	SD	( ) Delete
Name:	BOYD, SIS	
Address:	4188 PLAYER CIR	
City-St-Zip:	ORLANDO, FL 32808	
Title:	TD	( ) Delete
Name:	BADGER, KEN	
Address:	4152 PLAYER CIR	
City-St-Zip:	ORLANDO, FL 32808	
Title:	D	( ) Delete
Name:	CURL, FRANK	
Address:	4104 PLAYER CIR	
City-St-Zip:	ORLANDO, FL 32808	

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:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
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: BARBARA MAY PD 03/07/2006
Electronic Signature of Signing Officer or Director — Date