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03 SEP 17 PM 12:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 755365					
1. Entity Name ENGLISH PARK CONDOMINIUM, INC.					
Principal Place of Business 164 ULSTER LANE MELBOURNE, FL 32935		Mailing Address 164 ULSTER LANE MELBOURNE, FL 32935			
2. Principal Place of Business		3. Mailing Address			
State, Apt. #, etc.		State, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2202949	
Zip	Country	Zip	Country	Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>			58.75 Additional Fee Required		
6. Name and Address of Current Registered Agent CARAFA, MARY 164 ULSTER LANE MELBOURNE, FL 32935			7. Name and Address of New Registered Agent		
Name			Name		
Street Address (P.O. Box Number is Not Acceptable)			Street Address (P.O. Box Number is Not Acceptable)		
City			City		
FL			Zip Code		
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 _____ DATE _____					
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$6.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P	<input checked="" type="checkbox"/> Delete	TITLE	P/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LINDSEY, JACKIE		NAME	BRUNO HUOT	
STREET ADDRESS	168 ULSTER LANE		STREET ADDRESS	156 ULSTER LANE	
CITY-ST-ZIP	MELBOURNE, FL 32935		CITY-ST-ZIP	Melbourne FL 32935	
TITLE	VPD	<input checked="" type="checkbox"/> Delete	TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LINDSEY, JACKIE		NAME	Allen Lindsey	
STREET ADDRESS	168 ULSTER LANE		STREET ADDRESS	543 Royal Palm Blvd	
CITY-ST-ZIP	MELBOURNE, FL 32935		CITY-ST-ZIP	Satellite Bch, FL 32937	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LINDSEY, ALLEN		NAME	GAIL YOUNESS	
STREET ADDRESS	543 ROYAL PALM BAY		STREET ADDRESS	971 EAU GALLIE BLVD	
CITY-ST-ZIP	SATELLITE BEACH, FL 32937		CITY-ST-ZIP	Indian Harbour Bch, FL 32937	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUNT, BRUNO		NAME	Jackie Lindsey	
STREET ADDRESS	158 ULSTER LANE		STREET ADDRESS	155 ULSTER LANE	
CITY-ST-ZIP	MELBOURNE, FL 32935		CITY-ST-ZIP	Melbourne, FL 32935	
TITLE	Y	<input checked="" type="checkbox"/> Delete	TITLE	S/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YOUNESS, GAIL		NAME	Elizabeth Hancock	
STREET ADDRESS	971 EAU GALLIE BLVD		STREET ADDRESS	192 MARTESIA WAY	
CITY-ST-ZIP	INDIAN HARBOUR BEACH, FL 32937		CITY-ST-ZIP	Indian Harbour Bch, FL 32937	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRECO, MARYANN		NAME		
STREET ADDRESS	116 BRISTOL LANE		STREET ADDRESS		
CITY-ST-ZIP	MELBOURNE, FL 32935		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 trustee or trustee empowered to execute this report as required by Chapter 817, 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: <i>Jackie Lindsey</i>			Jackie Lindsey 9-11-03		

CHECK 007 (1/02)