

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010266

FILED  
Jan 07, 2006  
Secretary of State

**Entity Name:** ELLIS PARK COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

5800 N.W. 39TH AVENUE  
SUITE 101  
GAINESVILLE, FL 326066972 US

**New Principal Place of Business:**

**Current Mailing Address:**

5800 N.W. 39TH AVE  
STE 101  
GAINESVILLE, FL 326066972 US

**New Mailing Address:**

**FEI Number:** 51-0494181

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOWERS, PAUL D  
5800 N.W. 39TH AVENUE  
SUITE 101  
GAINESVILLE, FL 326066972 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: GREER, JOHN W III  
Address: 5800 N.W. 39TH AVENUE SUITE 101  
City-St-Zip: GAINESVILLE, FL 326066972 US

Title: D ( ) Delete  
Name: WAUGH, TIMOTHY W  
Address: 5800 N.W. 39TH AVENUE SUITE 101  
City-St-Zip: GAINESVILLE, FL 326066972 US

Title: D ( ) Delete  
Name: BOWERS, PAUL D  
Address: 5800 N.W. 39TH AVENUE SUITE 101  
City-St-Zip: GAINESVILLE, FL 326066972 US

**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:

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: PAUL D BOWERS

D

01/07/2006

Electronic Signature of Signing Officer or Director

Date