

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 05, 2007  
Secretary of State**

DOCUMENT# N05000002993

Entity Name: 1196, UNIT 7 CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

899 OUTER RD  
STE C  
ORLANDO, FL 32814

**New Principal Place of Business:**

**Current Mailing Address:**

899 OUTER RD  
STE C  
ORLANDO, FL 32814

**New Mailing Address:**

FEI Number: 47-0960112      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

HARKINS, C WILLIAM  
3525 W LAKE MARY BLVD SUITE 306  
LAKE MARY, FL 327463461 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: DPT ( ) Delete  
Name: HARKINS, C WILLIAM  
Address: 3525 W LAKE MARY BLVD SUITE 306  
City-St-Zip: LAKE MARY, FL 327463461

Title: DS ( ) Delete  
Name: HARKINS, MATT  
Address: 3525 W LAKE MARY BLVD SUITE 306  
City-St-Zip: LAKE MARY, FL 327463461

Title: DV ( ) Delete  
Name: VINACKE, AL  
Address: 3525 W LAKE MARY BLVD SUITE 306  
City-St-Zip: LAKE MARY, FL 327463461

Title: V ( ) Delete  
Name: MCNAMARA, KIMBERLY  
Address: 899 OUTER ROAD., STE C  
City-St-Zip: ORLANDO, FL 32814

**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:

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: KIMBERLY MCNAMARA

V

04/05/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date