2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009312

FILED Mar 20, 2007 Secretary of State

Entity Name: EMBASSY HOUSE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

536 NORTH MONROE STREET 117 EAST GEORGIA STREET TALLAHASSEE, FL 32301 TALLAHASSEE, FL 32301

Current Mailing Address: New Mailing Address:

536 NORTH MONROE STREET 117 EAST GEORGIA STREET TALLAHASSEE, FL 32301 TALLAHASSEE, FL 32301

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

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

FULLER, DENNIS
536 NORTH MONROE STREET
TALLAHASSEE, FL 32301 US
FULLER, DENNIS
117 EAST GEORGIA STREET
TALLAHASSEE, FL 32301 US
TALLAHASSEE, FL 32301 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: 03/20/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P () Delete Title: P (X) Change () Addition

Name: FULLER, DENNIS Name: FULLER, DENNIS
Address: 536 NORTH MONROE STREET Address: 117 EAST GEORGIA STREET

City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: TALLAHASSEE, FL 32301

Title: VP () Delete Title: VP (X) Change () Addition Name: CHERRY, GARY Name: CHERRY, GARY

Address: 536 NORTH MONROE STREET Address: 117 EAST GEORGIA STREET

City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: TALLAHASSEE, FL 32301

Title: S () Delete Title: S (X) Change () Addition Name: CRUTCHFIELD, WILL Name: CRUTCHFIELD, WILL

Address: 536 NORTH MONROE STREET Address: 117 EAST GEORGIA STREET City-St-Zip: TALLAHASSEE, FL 32301 TALLAHASSEE, FL 32301

Name:CRUTCHFIELD, WILLName:CRUTCHFIELD, WILLAddress:536 NORTH MONROE STREETAddress:117 EAST GEORGIA STREETCity-St-Zip:TALLAHASSEE, FL 32301City-St-Zip:TALLAHASSEE, FL 32301

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: DENNIS FULLER P 03/20/2007