2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51311

Entity Name: BRADFORDT PARK ASSOCIATION, INC.

FILED Apr 16, 2004 Secretary of State

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

C/O MID-FLORIDA PROP MGMT 2180 WEST SR 434 SUITE 5000

5025 S US HWY 17-92 CASSELBERRY, FL 32707 LONGWOOD, FL 32779 US

Current Mailing Address: New Mailing Address:

C/O MID-FLORIDA PROP MGMT 2180 WEST SR 434

5025 S US HWY 17-92 SUITE 5000

CASSELBERRY, FL 327073845 US LONGWOOD, FL 32779 US

FEI Number: 59-3145015 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SPARE, WILLIAM C HART, JAMES W JR C/O SENTRY MANAGEMENT INC C/O MID-FLORIDA PROPERTY MGMT 2180 WEST SR 434 SUITE 5000 5025 S US HWY 17-92 CASSELBERRY, FL 32707 US LONGWOOD, FL 32779 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: JAMES W HART JR 04/16/2004

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PTD (X) Change () Addition () Delete

EMLING, JONI M EMLING, JONI M Name: Name: 3055 BIRMINGHAM BLVD. Address: 3055 BIRMINGHAM BLVD. Address: City-St-Zip: ORLANDO, FL 32829 City-St-Zip: ORLANDO, FL 32829

(X) Change () Addition Title: SD () Delete Title:

NAPOLITANO, TERRY Name: Name: MARRERO, ELIZABETH Address: 3043 BIRMINGHAM BLVD Address: 3254 BIRMINGHAM BLVD City-St-Zip: ORLANDO, FL 32829 City-St-Zip: ORLANDO, FL 32829

Title: VD. () Delete Title: **VPD** (X) Change () Addition

HIGH, BRADLEY Name: HIGH, BRADLEY S Name: 3254 BIRMINGHAM BLVD 3254 BIRMINGHAM BLVD Address: Address: City-St-Zip: ORLANDO, FL 32829 City-St-Zip: ORLANDO, FL 32829

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JONI M EMLING PD 04/16/2004