2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000003262

FILED Feb 24, 2006 Secretary of State

Entity Name: 1201-1203 NW 4TH ST. CONDOMINIUM ASSN., INC.

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

502 NW 16TH AVE 1201-1203 NW 4TH ST. CONDOMINIUM ASSN., IN GAINESVILLE, FL 32601

GAINESVILLE, FL 32601

Current Mailing Address: New Mailing Address:

1203 NW 4TH ST 502 NW 16TH AVE

GAINESVILLE, FL 32601 ANIEL

GAINESVILLE, FL 32601

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

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

WARREN, MICHAEL E MCCANN, DANIEL 502 NW 16TH AVE 1203 NW 4TH ST

GAINESVILLE, FL 32601 US GAINESVILLE, FL 32601 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: DANIEL MCCANN 02/24/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DP () Delete (X) Change () Addition

WARREN, MICHAEL E MCCANN, DANIEL Name: Name: 502 NW 16TH AVE Address: 1203 NW 4TH ST Address: City-St-Zip: GAINESVILLE, FL 32601 City-St-Zip: GAINESVILLE, FL 32601

Title: DV Title: MR (X) Change () Addition () Delete

Name: BEERY, BEAU Name: MCCANN, DANIEL Address: 502 NW 16TH AVE Address: 1203 NW 4TH ST City-St-Zip: GAINESVILLE, FL 32601 City-St-Zip: GAINESVILLE, FL 32601

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

KABLER, PHILIP N MCCANN, DANIEL Name: Name: 502 NW 16TH AVE Address: Address: 1203 NW 4TH ST City-St-Zip: GAINESVILLE, FL 32601 City-St-Zip: GAINESVILLE, FL 32601

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: DANIEL MCCANN MR 02/24/2006