

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 23, 2006 8:00 am**  
**Secretary of State**

03-23-2006 90021 024 \*\*\*\*61.25

**DOCUMENT # N32596**  
 1. Entity Name  
 601 OFFICE PLAZA CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business      Mailing Address  
 % K.M. BURGE      % K.M. BURGE  
 643 17TH STREET      643 17TH STREET  
 VERO BEACH, FL 32960 US      VERO BEACH, FL 32960 US

50005103



2. Principal Place of Business      3. Mailing Address  
 637 17th Street      P.O. Box 369  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.

01102006    Chg-NP    CR2E037 (11/05)

City & State      City & State  
 Vero Beach FL      Vero Beach FL  
 Zip      Country      Zip      Country  
 32960      US      32961-0369      US

4. FEI Number      Applied For  
 59-2972392      Not Applicable

5. Certificate of Status Desired      \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 BURGE, K.M.  
 643 17TH STREET  
 SUITE 2 R  
 VERO BEACH, FL 32960

7. Name and Address of New Registered Agent  
 Name Edward W. Rubinski  
 Street Address (P.O. Box Number is Not Acceptable)  
 637 17th Street  
 City Vero Beach      FL      Zip Code 32960

8. 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. I am familiar with, and accept the obligations of registered agent.  
 SIGNATURE *[Signature]*      Edward W. Rubinski      3/14/06  
Signature, typed or printed name of registered agent and title if applicable.      (NOTE: Registered Agent signature required when reinstating)      DATE

**Filing Fee is \$61.25 Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution.      \$5.00 May Be Added to Fees

**Make check payable to Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	DS	<input type="checkbox"/> Delete
NAME	KUTSCHINSKI, RONALD C.	
STREET ADDRESS	1826 US HIGHWAY #1	
CITY-ST-ZIP	VERO BEACH, FL	
TITLE	DP	<input type="checkbox"/> Delete
NAME	RUBINSKI, EDWARD W.	
STREET ADDRESS	637 17TH STREET	
CITY-ST-ZIP	VERO BEACH, FL	
TITLE	DV	<input checked="" type="checkbox"/> Delete
NAME	BURGE, K.M.	
STREET ADDRESS	643 17TH STREET	
CITY-ST-ZIP	VERO BEACH, FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	CUTRIGHT, DAVID	
STREET ADDRESS	641 17TH ST.	
CITY-ST-ZIP	VERO BCH, FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*      Edward W. Rubinski      3/14/06      772-567-2111  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #