

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716196

FILED
Apr 28, 2008
Secretary of State

Entity Name: THE REGENCY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

250 BEACH RD
TEQUESTA, FL 33469

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4464
TEQUESTA, FL 33469 US

New Mailing Address:

ACCOUNTING DEPT. INC.
185 EAST INDIANTOWN RD. SUITE 127
JUPITER, FL 33477

FEI Number: 59-1314003

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAPAGEORGE, TERRI
ACCOUNTING DEPARTMENT INC
185 E INDUSTRIAL RD SUITE 127
JUPITER, FL 33477 US

Name and Address of New Registered Agent:

PAPAGEORGE, TERRI
185 E. INDIANTOWN ROAD
SUITE 127
JUPITER, FL 33477 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: TERRI PAPAGEORGE

04/28/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROSS, FRANK
Address: 250 BCH RD 401
City-St-Zip: TEQUESTA, FL 33469

Title: T () Delete
Name: AUSE, ROBERT
Address: 1821 SHERIDAN
City-St-Zip: ANN ARBOR, MI 48104

Title: S () Delete
Name: DENNIS, JANICE
Address: 250 BCH RD 303
City-St-Zip: TEQUESTA, FL 33469

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: FONNER, BARBARA A
Address: 250 BCH RD 108
City-St-Zip: TEQUESTA, FL 33469

I hereby certify that the information supplied with this filing does not qualify 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: BARBARA FONNER

S

04/28/2008

Electronic Signature of Signing Officer or Director

Date