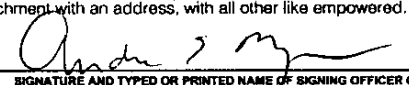


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90054 027 ****61.25

DOCUMENT # 719722 1. Entity Name THE VICTORIAN CONDOMINIUM APARTMENTS, INC.					
Principal Place of Business 2401 PARK AVE, APT. 2 RIVIERA BEACH, FL 33404			Mailing Address 2401 PARK AVE, APT. 2 RIVIERA BEACH, FL 33404		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
MYERS, ANDY 2401 PARK AVENUE #3 RIVIERA BEACH, FL 33404			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reconstituting) _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable.					
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	SHEEHY, PATRICK		NAME		
STREET ADDRESS	107 VILLAGE GREEN		STREET ADDRESS		
CITY - ST - ZIP	BARDONIA, NY 10954		CITY - ST - ZIP		
TITLE	STD	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	MYERS, ANDY		NAME		
STREET ADDRESS	926 WOODLANE ROAD		STREET ADDRESS		
CITY - ST - ZIP	BEVERLY, NJ 08010		CITY - ST - ZIP		
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	MALT, ALFRED		NAME		
STREET ADDRESS	2401 PARK AVE, APT. 2		STREET ADDRESS		
CITY - ST - ZIP	WEST PALM BEACH, FL 33404		CITY - ST - ZIP		
TITLE	VP	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	HEAL, MARTHA		NAME		
STREET ADDRESS	SALEM RD		STREET ADDRESS		
CITY - ST - ZIP	BURLINGTON, NJ		CITY - ST - ZIP		
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	ERICKSON, RALPH		NAME		
STREET ADDRESS	2401 PARK AVE, APT #1		STREET ADDRESS		
CITY - ST - ZIP	RIVIERA BEACH, FL 334044712		CITY - ST - ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			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: 			Andrew E. Myers 2/20/06 (609) 518-2525		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		