

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 24, 2007 8:00 am**  
**Secretary of State**

04-24-2007 90011 022 \*\*\*\*61.25

<b>DOCUMENT # 723800</b> 1. Entity Name <b>REGENCY WOOD CONDOMINIUM, INC.</b>					
Principal Place of Business <b>MARVIN REAL ESTATE</b> <b>1835 N 3RD STREET</b> <b>JACKSONVILLE BEACH, FL 32250</b>			Mailing Address <b>PO BOX 330026</b> <b>ATLANTIC BEACH, FL 32233</b>		
2. Principal Place of Business - No P.O. Box # <b>753 Atlantic Blvd</b>		3. Mailing Address <b>PO Box 330026</b>			
Suite, Apt. #, etc. <b>#1</b>		Suite, Apt. #, etc.			
City & State <b>Atlantic Beach FL</b>		City & State <b>Atlantic Beach FL</b>			
Zip <b>32233</b>		Country <b>USA</b>		Zip <b>32233</b>	
Country <b>USA</b>		4. FEI Number <b>59-1484131</b>			
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>MARVIN, SONIA M</b> <b>C/O MARVIN REAL ESTATE</b> <b>1835 N 3RD STREET</b> <b>JACKSONVILLE BEACH, FL 32250</b>			7. Name and Address of New Registered Agent Name <b>Marvin + Floyd Realty Inc</b> Street Address (P.O. Box Number is Not Acceptable) <b>753 Atlantic Blvd #1</b> City <b>Atlantic Beach</b> <b>FL</b> Zip Code <b>32233</b>		
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 <b>Marvin + Floyd Realty Inc</b> <i>[Signature]</i> <b>3-26-07</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering) DATE</small>					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make check payable to</b> <b>Florida Department of State</b>	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DENNEY, DAVID 337 GREENCASTLE DR JACKSONVILLE, FL 32225	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPP Andrew Williams 389 Regency Wood Drive Jacksonville, FL 32225
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COBBLE, JUDITH M 309 GREENCASTLE DR JACKSONVILLE, FL 32225	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D J. Dudley Freeman 318 Raleigh Road Jacksonville, FL 32225
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS FRASIER, LUCY 310 RALEIGH RD JACKSONVILLE, FL 32225	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Oscar Bernier 424 Overbrook Drive Jacksonville, FL 32225
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CEA, LORRAINE 407 ABINGDON PLACE JACKSONVILLE, FL 32225	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Mikel Barbare 387 Regency Wood Drive Jacksonville, FL 32225
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARBARE, MIKEL 387 REGENCY WOOD DRIVE JACKSONVILLE, FL 32225	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Jean Denney 337 Greencastle Drive Jacksonville, FL 32225
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAURO, BARBARA 321 GREENCASTLE DR JACKSONVILLE, FL 32225	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D 
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: <i>[Signature]</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date: <b>4/9/07</b> <small>Daytime Phone #</small>	