2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#729534

FILED Jan 17, 2005 Secretary of State

Entity Name: VIEUX CARRE CONDOMINIUM ASSOCIATION, INC.

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

16105 N FLORIDA SUITE A 5008 W. LINEBAUGH AVENUE

LUTZ, FL 33549 US

TAMPA, FL 33624 US

Current Mailing Address: New Mailing Address:

16105 N FLORIDA SUITE A 5008 W. LINEBAUGH AVENUE

LUTZ, FL 33549 US 15 TAMPA, FL 33624 US

FEI Number: 59-1607381 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

15

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

SPIVEY, WILLIAM C ANDOVER PRICE PROPERTIES, INC. 16105 N FLORIDA SUITE A 5008 W. LINEBAUGH AVENUE

LUTZ, FL 33549 US 15 TAMPA, FL 33624 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: TIM E. PRICE 01/17/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: SD () Delete Title: SD (X) Change () Addition

 Name:
 BOWNS, KATHRYN
 Name:
 YOUNG, JANE

 Address:
 4423 VIEUX CARRE CIR
 Address:
 4477 VIEUX CARRE CIR

 City-St-Zip:
 TAMPA, FL 33613
 City-St-Zip:
 TAMPA, FL 33613

Title: TD () Delete Title: PD (X) Change () Addition Name: PRETO-RODAS, RICHARD Name: PRETO-RODAS, RICHARD

Address: 4483 VIEUX CARRE Address: 4483 VIEUX CARRE
City-St-Zip: TAMPA, FL 33613 City-St-Zip: TAMPA, FL 33613

 $\label{eq:title:pd} \textit{Title:} \qquad \textit{PD} \qquad (\) \, \textit{Delete} \qquad \qquad \textit{Title:} \qquad \textit{TD} \qquad (\textit{X}) \, \textit{Change} \, (\) \, \textit{Addition}$

 Name:
 RHERT, LYNDA A
 Name:
 RHEA, LYNDA A

 Address:
 4401 VIEUX CARRE CIR.
 Address:
 4401 VIEUX CARRE CIR.

 City-St-Zip:
 TAMPA, FL 33613
 City-St-Zip:
 TAMPA, FL 33613

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TIM E. PRICE RA 01/17/2005