

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734288

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: COLLEGE PARK TOWERS, INC.

## Current Principal Place of Business:

5200 EGGLESTON  
ORLANDO, FL 32810

## New Principal Place of Business:

5200 EGGLESTON AVENUE  
ORLANDO, FL 32810

## Current Mailing Address:

5200 EGGLESTON  
ORLANDO, FL 32810

## New Mailing Address:

5200 EGGLESTON AVENUE  
ORLANDO, FL 32810

FEI Number: 59-1641438

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CRAWFORD, RONALD W  
1914 EDGEWATER DRIVE  
ORLANDO, FL 32804 US

## Name and Address of New Registered Agent:

WILK, SHERRY  
9066 FLORIBUNDA DRIVE  
ORLANDO, FL 32818 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: SHERRY WILK

04/14/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: DUNN, JUDY  
Address: 1112 DRUID RD.  
City-St-Zip: MAITLAND, FL 32751

Title: VP ( ) Delete  
Name: OTEGBEYE, DEJI  
Address: 511 SYLVAN DRIVE  
City-St-Zip: WINTER PARK, FL 32789

Title: ST ( ) Delete  
Name: TEMPLE, JERRY  
Address: 228 W. HIGHLAND STREET  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D ( ) Delete  
Name: STUART, BETTY  
Address: 916 VALENCIA AVE.  
City-St-Zip: ORLANDO, FL 32804

Title: D ( ) Delete  
Name: LAYNE, FRED  
Address: 1351 FRANKLIN ST  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D ( ) Delete  
Name: CROSBY, BEN  
Address: 2918 CARROLL PLACE  
City-St-Zip: ORLANDO, FL 32804

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: P (X) Change ( ) Addition  
Name: WILK, SHERRY  
Address: 9066 FLORIBUNDA DRIVE  
City-St-Zip: ORLANDO, FL 32818

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

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

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

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: SHERRY WILK

P

04/14/2009

Electronic Signature of Signing Officer or Director

Date