


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 14, 2007 8:00 am
Secretary of State

02-14-2007 90052 032 ****61.25

DOCUMENT # 746410	
1. Entity Name THE ABBEY CONDOMINIUM ASSOCIATION, INC.	

Principal Place of Business 4100 NW HWY 27 OCALA, FL 34482	Mailing Address 4100 NW HWY 27 OCALA, FL 34482
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DO NOT WRITE IN THIS SPACE

02082007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2175128	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

HUDSON, BRENDA
4100 NW HWY 27
OCALA, FL 34482

**DO NOT WRITE
IN THIS SPACE**

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 re-registering) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD HUDSON, BRENDA 4100 NW HWY 27 OCALA, FL 34482
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD PHILBROOK, EILEEN 4343 NW 80TH AVE. OCALA, FL 34482
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD WIGGINS, MARLENE 4343 NW 80TH AVE. OCALA, FL 34482
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: BRENDA HUDSON 2/9/07 (352) 732-4192
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #