

**2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Sep 24, 2006**  
**Secretary of State**

DOCUMENT# 746519

**Entity Name:** BARCLEY ESTATES CONDOMINIUM NO. 2 ASSOCIATION, INC.**Current Principal Place of Business:**8760 DR MLKING ST N  
ST PETERSBURG, FL 33702 US**New Principal Place of Business:**8710 DR MLKING ST N  
ST PETERSBURG, FL 33702 US**Current Mailing Address:**8760 DR MLKING ST N  
ST PETERSBURG, FL 33702 US**New Mailing Address:**8710 DR MLKING ST N  
ST PETERSBURG, FL 33702 US**FEI Number:** 59-2028363**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MILLS, TOMMY  
8760 DR M L KING ST N  
ST PETERSBURG, FL 33702 US**Name and Address of New Registered Agent:**MUENGER, HEIDI A MRS  
8710 DR M L KING ST N  
ST PETERSBURG, FL 33702 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: HEIDI A MUENGER

09/24/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MILLS, TOMMY  
Address: 8760 DR MLKING ST N  
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: D ( ) Delete  
Name: GOMEZ, LINDA  
Address: 8720 DR. MLKING ST. N  
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: SD ( ) Delete  
Name: CROCKETT, DOROTHY  
Address: 8750 DR MLKING ST N  
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: D ( ) Delete  
Name: YOUNG, NANCY ANN  
Address: 8700 DR MLKING ST N  
City-St-Zip: SAINT PETERSBURG, FL 33702

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

Title: PT (X) Change ( ) Addition  
Name: MUENGER, HEIDI A MRS  
Address: 8710 DR MLKING ST N  
City-St-Zip: SAINT PETERSBURG, FL 33702

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

Title: S (X) Change ( ) Addition  
Name: CROCKETT, DOROTHY  
Address: 8750 DR MLKING ST N  
City-St-Zip: SAINT PETERSBURG, FL 33702

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

I hereby certify that the information supplied with this filing does not qualify for the 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: HEIDI A MUENGER

PT

09/24/2006

Electronic Signature of Signing Officer or Director

Date