

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765725

FILED
Apr 25, 2005
Secretary of State

Entity Name: SUGAR MILL TWO CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6015 MORROW ST. E.
SUITE 107
JACKSONVILLE, FL 32217

New Principal Place of Business:

Current Mailing Address:

6015 MORROW ST. E.
SUITE 107
JACKSONVILLE, FL 32217

New Mailing Address:

FEI Number: 59-2249683

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAYMUND S. SULLIVAN
6015 MORROW ST.,E.STE.107
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

BANNING MANAGEMENT INC
6015 MORROW ST.,E.STE.107
JACKSONVILLE, FL 32217 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: BANNING MANAGEMENT INC

04/25/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SMALL, ROBERT,
Address: 3801 CROWN POINT RD.
City-St-Zip: JACKSONVILLE, FL

Title: VD () Delete
Name: FREO, PHIL
Address: 12745 GINGER DR
City-St-Zip: JACKSONVILLE, FL 32223

Title: STD () Delete
Name: JONES, BARBARA
Address: 3801 CROWN POINT ROAD, #2064
City-St-Zip: JACKSONVILLE, FL 32257

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: STD (X) Change () Addition
Name: TARRANCE, MARK
Address: 3801 CROWN POINT ROAD, #2073
City-St-Zip: JACKSONVILLE, FL 32257

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: BOB SMALL

PD

04/25/2005

Electronic Signature of Signing Officer or Director

Date