## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

	ANITOAL	. IXE. O.X.			Heb 25.	2008 8:00	am	
DOCUMENT # 769970  1. Entity Name THE MADISON PARK ANNEX OFFICEOWNERS' ASSOCIATION, INC.					Secreta	ary of State 90045 006 ****61.2	te	
4300 BAYOU BLVD 43 SUITE 30 ST		Mailing Address 4300 BAYON BLVD STE 30 PENSACOLA, FL 32503	4300 BAYON BLVD STE 30		III FRANK ANNR NAKA NANK NANK	ATH ANN ANN EACH ANN AND THE	W( <b>0</b> ) <b>0</b> ) 100)	
2. Principal P	face of Business - No P.O. Box #	3. Mailing Address	3. Mailing Address 4300 Bayou Blvd					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			008 Chg-NP	CR2E037 (12/06)		
City & State		Pensacola FL			4. FEI Number Applied For 59-2579540 Not Applicable			
Zip Country		32503	Country U.S	5. Certificate of Status Desired		Sa.75 Additional Fee Required		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
KAZZIAH, JOHN M 4300 BAYOU BLVD PENSACOLA, FL 32503			Street A	Name Kizziah, John B Street Address (P.O. Box Number is Not Acceptable) 4300 Rayou Blvd. Suite 30				
				Pensacola FL Zip Code 32503				
SIGNATURE .	Signature, typed or printed name of registered agent Filling Fee is \$61.25 Due by May 1, 2008	and title 1 applicable. (NOTE:  9. Election Camp Trust Fund Co	paign Financing	\$5.00 Added to	May Be	DATE  Make check:payable to the description of S		
10.	OFFICERS AND DI	RECTORS	11.	ADDITION	S/CHANGES TO OFF	ICERS AND DIRECTORS IN	J 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDD KIZZIAH, JOHN M 4300 BAYOU BLVD, STE 30 PENSACOLA, FL 32503	☐ Detele	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITION	3/CHANGES TO OFF	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST ROSENBLOOM, LOUIS K 4300 BAYOU BLVD STE 36 PENSACOLA, FL 32503	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Rosenblou	ım, Louis h	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JONES, RON 4300 BAYOU BLVD, STE 34 PENSACOLA, FL 32503	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS GITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	. TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS			☐ Change	Addition	

CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Louisk. Rosenbloum

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 affectine of with an address, with all other like empowered.

850-475-1211

Daytime Phone #