

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K02339

FILED
Apr 20, 2005
Secretary of State

Entity Name: PERSHING OAKS APARTMENTS, INC.

Current Principal Place of Business:

4439-6 HECTOR COURT
APT 6
ORLANDO, FL 32822 US

New Principal Place of Business:

Current Mailing Address:

1600 EAST ROBINSON STREET
SUITE 400
ORLANDO, FL 32803

New Mailing Address:

FEI Number: 59-2857774 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, MARIO A P.A.
ONE SOUTH ORANGE AVENUE
SUITE 401
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

GARCIA, MARIO A P.A.
400 N. FERNCREEK AVENUE
ORLANDO, FL 32803 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: GARCIA MARIO

04/20/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CAMACHO, JOSE
Address: 1600 EAST ROBINSON STREET, STE 400
City-St-Zip: ORLANDO, FL 32803

Title: D () Delete
Name: ESTEFANO, CRISTAFI
Address: 1600 EAST ROBINSON STREET, STE 400
City-St-Zip: ORLANDO, FL 32803

Title: D () Delete
Name: CLARETTI, CLAUDIO
Address: 1600 EAST ROBINSON STREET, STE 400
City-St-Zip: ORLANDO, FL 32803

Title: D () Delete
Name: MOGNO, AURELIO
Address: 1600 EAST ROBINSON STREET, STE 400
City-St-Zip: ORLANDO, FL 32803

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: CRISAFI, ESTEFANO
Address: 1600 EAST ROBINSON STREET, STE 400
City-St-Zip: ORLANDO, FL 32803

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSE CAMACHO

D

04/20/2005

Electronic Signature of Signing Officer or Director

Date