

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003559

FILED
Apr 27, 2005
Secretary of State

Entity Name: COLONIAL EXECUTIVE PARK PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

% ORBIS PROPERTIES
121 W 92ND SREET
NEW YORK, NY 100257576 US

New Principal Place of Business:

121 W 92ND SREET
NEW YORK, NY 100257576 US

Current Mailing Address:

% ORBIS PROPERTIES
121 W 92ND SREET
NEW YORK, NY 100257576 US

New Mailing Address:

121 W 92ND SREET
% ORBIS PROPERTIES, LLC
NEW YORK, NY 100257576 US

FEI Number: 04-3637647

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUBBARD, STEVEN W
2320 FIRST STREET
SUITE 1000
FORT MYERS, FL 33901 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GABLER, CHARLES L JR.
Address: 20 HIGHLAND AVENUE
City-St-Zip: CHAPPAQUA, NY 10514 US

Title: VD () Delete
Name: KAMHI, MAX
Address: 121 W 92ND STREET
City-St-Zip: NEW YORK, NY 100257576 US

Title: STD () Delete
Name: RODNEY, FIDLER A JR
Address: 6584 PLANTATION PINES BLVD
City-St-Zip: FORT MYERS, FL 33912 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

SIGNATURE: MAX KAMHI

VD

04/27/2005

Electronic Signature of Signing Officer or Director

_____ Date