2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004
Secretary of State

DOCUMENT# N00000008512

Entity Name: COMMERCE PARK OF COCONUT CREEK PRIVATE ROAD ASSOCIATION, INC.

Current Principal Place of Business:

C/O ROSANNE M. DUANE, TRUSTEE
ONE NORTH CLEMATIS ST, #400
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

C/O ROSANNE M. DUANE, TRUSTEE
ONE NORTH CLEMATIS ST, #400
WEST PALM BEACH, FL 33401

New Mailing Address:

FEI Number: 65-1098378 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ANGELL CORPORATE SERVICES, INC.
ONE NORTH CLEMATIS STREET
SUITE 400
WEST PALM BEACH, FL 33401

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: D ( ) Delete
Name: GINSBURG, ALAN H
Address: 1551 SANDSPUR RD.
City-St-Zip: MAITLAND, FL 32751

Title: D ( ) Delete
Name: TAYLOR, TERRY
Address: 515 E. LAS OLAS BLVD.
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: D ( ) Delete
Name: DUANE, ROSANNE M TRU
Address: ONE NORTH CLEMATIS STREET, SUITE 400
City-St-Zip: WEST PALM BEACH, FL 33401

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: ROSANNE M DUANE D 04/28/2004

Electronic Signature of Signing Officer or Director — Date