2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2005
Secretary of State

DOCUMENT# N01000002734

Entity Name: CLARK ROAD MEDICAL PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2621 MALL DRIVE
SARASOTA, FL 34231

New Principal Place of Business:

Current Mailing Address:

2621 MALL DRIVE
SARASOTA, FL 34231

New Mailing Address:

FEI Number: 02-0558091 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

R. CRAIG HARRISON
1605 MAIN STREET
SUITE 1111
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

PHILIP ASKINS
P.O. BOX 21689
SARASOTA, FL 34276 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: PHILIP ASKINS 01/31/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: ROBERTS, ALAN C
Address: 2621 MALL DRIVE
City-St-Zip: SARASOTA, FL 34231

Title: VSD ( ) Delete
Name: ROBERTS, LAURA G
Address: 2621 MALL DRIVE
City-St-Zip: SARASOTA, FL 34231

Title: TD ( ) Delete
Name: GARNER, JOHN W
Address: 2621 MALL DRIVE
City-St-Zip: SARASOTA, FL 34231

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: ALAN ROBERTS PD 01/31/2005
Electronic Signature of Signing Officer or Director Date