2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005684

FILED Apr 13, 2006 Secretary of State

Entity Name: UNIVERSITY PARK HOMEOWNERSHIP FOUNDATION INC.

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
P O BOX 1 GAINESVII	2103 _LE, FL 32604				
Current Mailing Address:			New Maili	New Mailing Address:	
P O BOX 12103 GAINESVILLE, FL 32604					
FEI Number:		FEI Number Applied For ()	FEI Number Not Appl	licable (X) Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
SCHNELL, LARRY 2048 NW 7 LANE GAINESVILLE, FL 32603 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:					
	Electronic	Signature of Registered Ager	nt	Date	
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () C SCHNELL, LARR' 2048 NE 7 LANE GAINESVILLE, FI		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () E HARRIS, SAM 1722 NE 5 AVENI GAINESVILLE, FI		Title: Name: Address: City-St-Zip:	D (X) Change () Addition GOLDSTEIN, MARK 1215 NW 7TH PLACE GAINESVILLE, FL 32603	
Title: Name: Address: City-St-Zip:	TD () E HURTAK, DIANE 1729 NW 8TH AV GAINESVILLE, FI		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () D SCHMID, JOSEP 1735 NW 7 PLAC GAINESVILLE, FI	E	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (X) E GOLSTEIN, MARI 1215 NW 7 PLAC GAINESVILLE, FI	E	Title: Name: Address: City-St-Zip:	()Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: DIANE HURTAK TD 04/13/2006