

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008228

FILED
Feb 12, 2004
Secretary of State**Entity Name:** THE FLORIDA CENTRAL PARK PROPERTY OWNER'S ASSOCIATION, INC.**Current Principal Place of Business:**2987 CLAIRMONT RD, STE 550
ATLANTA, GA 30329**New Principal Place of Business:****Current Mailing Address:**2987 CLAIRMONT RD, STE 550
ATLANTA, GA 30329**New Mailing Address:****FEI Number:** 58-2665024**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324 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: D () Delete
Name: PATTILLO, ROBERT A
Address: 2987 CLAIRMONT RD, STE 550
City-St-Zip: ATLANTA, GA 30329

Title: D () Delete
Name: WALD, DANIEL L
Address: 2987 CLAIRMONT RD, STE 550
City-St-Zip: ATLANTA, GA 30329

Title: D () Delete
Name: REESE, CLAY W
Address: 2987 CLAIRMONT RD, STE 550
City-St-Zip: ATLANTA, GA 30329

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: WALD, DANIEL L
Address: 2987 CLAIRMONT RD, STE 550
City-St-Zip: ATLANTA, GA 30329

Title: S (X) Change () Addition
Name: REESE, CLAY W
Address: 2987 CLAIRMONT RD, STE 550
City-St-Zip: ATLANTA, GA 30329

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: CLAY W. REESE

SEC

02/12/2004

Electronic Signature of Signing Officer or Director

Date