2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N02000000061

TileD
Jun 24, 2005
Secretary of State

Entity Name: THE PARCEL 28.01 PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

5858 CENTRAL AVENUE ST. PETERSBURG, FL 33707

Current Mailing Address: New Mailing Address:

5858 CENTRAL AVENUE ST. PETERSBURG, FL 33707

FEI Number: 20-1065797 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GARY, JOHN W III, ES 701 U.S. HIGHWAY ONE SUITE 402 NORTH PALM BEACH, FL 33408 US

OFFICERS AND DIRECTORS:

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

Electronic Olghature of Negistered At

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: D () Delete Title: D (X) Change () Addition

Name: PURINTON, JAMES H Name: LUPTAK, PAOLA

Address: 100 N. RIVERSIDE, STE. 1400 Address: 4700 NW BOCA RATON BLVD, 4TH FLOOR

City-St-Zip: CHICAGO, IL 60601 City-St-Zip: BOCA RATON, FL 33431

Title: DST () Delete Title: () Change () Addition

 Name:
 SEMBLER, GREGORY S
 Name:

 Address:
 5858 CENTRAL AVENUE
 Address:

 City-St-Zip:
 ST. PETERSBURG, FL 33707
 City-St-Zip:

Title: DP () Delete Title: () Change () Addition

 Name:
 SHER, CRAIG H
 Name:

 Address:
 5858 CENTRAL AVENUE
 Address:

 City-St-Zip:
 ST. PETERSBURG, FL 33707
 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: CRAIG SHER P 06/24/2005