

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006382

FILED  
Apr 25, 2006  
Secretary of State

**Entity Name:** COLONIAL TOWNPARK PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O COLONIAL PROPERTIES TRUST  
950 MARKET PROMENADE AVE, #2200  
LAKE MARY, FL 32746

**New Principal Place of Business:**

**Current Mailing Address:**

C/O COLONIAL PROPERTIES TRUST  
950 MARKET PROMENADE AVE, #2200  
LAKE MARY, FL 32746

**New Mailing Address:**

**FEI Number:** 16-1631341

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
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: DPT ( ) Delete  
Name: GREEN, TOM  
Address: 950 MARKET PROMENADE AVE #2200  
City-St-Zip: LAKE MARY, FL 32746

Title: DVS ( ) Delete  
Name: LOCKE, JR, BERT  
Address: 950 MARKET PROMENADE AVE, #2200  
City-St-Zip: LAKE MARY, FL 32746

Title: DV ( ) Delete  
Name: LASSETER, JIM  
Address: 950 MARKET PROMENADE AVE, #2200  
City-St-Zip: LAKE MARY, FL 32746

**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 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: STEPHEN ARNOLD

MR.

04/25/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date