

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006807

FILED  
Apr 24, 2006  
Secretary of State

**Entity Name:** REGENTS PARK OF GAINESVILLE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

502 NW 16TH AVE.  
GAINESVILLE, FL

**New Principal Place of Business:**

5522 NW 43 STREET  
SUITE B  
GAINESVILLE, FL 32653

**Current Mailing Address:**

502 NW 16TH AVE.  
GAINESVILLE, FL

**New Mailing Address:**

5522 NW 43 STREET  
SUITE B  
GAINESVILLE, FL 32653

**FEI Number:** 41-2093163

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WARREN, MICHAEL E  
502 NW 16TH AVE.  
GAINESVILLE, FL US

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

LINDSEY, GLENDA  
C/O BOSSHARDT PROPERTY MGT INC.  
5522 NW 43 STREET SUITE B  
GAINESVILLE, FL 32653 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: GLENDA LINDSEY

04/24/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: WARREN, MICHAEL E  
Address: 7115 NW 28TH AVE  
City-St-Zip: GAINESVILLE, FL 32606

Title: VTD ( ) Delete  
Name: BUCHANAN, SCOTT A  
Address: 3744 SW 56TH RD.  
City-St-Zip: GAINESVILLE, FL 32608

Title: SD ( ) Delete  
Name: BEERY, BEAU  
Address: 9989 NW 21ST AVE  
City-St-Zip: GAINESVILLE, FL 32606

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**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:

Title: D ( ) Change (X) Addition  
Name: BOCCABELLA, DAN  
Address: 120 NE 4 STREET #24  
City-St-Zip: GAINESVILLE, FL 32601

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: MICHAEL WARREN

PD

04/24/2006

Electronic Signature of Signing Officer or Director

Date