2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006807

FILED Apr 21, 2008 Secretary of State

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

Current Principal Place of Business:	New Principal Place of Business:	i
5522 NW 43 STREET SUITE B GAINESVILLE, FL 32653	502 NW 16 AVENUE GAINESVILLE, FL 32061 US	

Current Mailing Address: New Mailing Address:

5522 NW 43 STREET
SUITE B
GAINESVILLE, FL 32061 US
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: Name and Address of New Registered Agent:

MORALES, CAROL
C/O BOSSHARDT PROPERTY MGT INC.
5522 NW 43 STREET SUITE B
GAINESVILLE, FL 32653 US

KEPNER, KAREN
502 NW 16 AVENUE
GAINESVILLE, FL 32601 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: KAREN KEPNER 04/21/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PD () Change () Addition () Delete WARREN, MICHAEL E Name: Name: 7115 NW 28TH AVE Address: Address: City-St-Zip: GAINESVILLE, FL 32606 City-St-Zip: VPD Title: VTD () Delete Title: (X) Change () Addition Name: BUCHANAN, SCOTT A Name: BUCHANAN, SCOTT A Address: 3744 SW 56TH RD. Address: 3744 SW 56TH RD. City-St-Zip: GAINESVILLE, FL 32608 City-St-Zip: GAINESVILLE, FL 32608 Title: () Delete Title: SD (X) Change () Addition KABLER, PHIL Name: BOCCABELLA, DAN Name: 7418 WHITE OAKS RD Address: Address: 120 NE 4 STREET City-St-Zip: ALACHUA, FL 32615 City-St-Zip: GAINESVILLE, FL 32601

Title: TD (X) Delete Title: () Change () Addition

 Name:
 BOCCABELLA, DAN
 Name:

 Address:
 120 NE 4 STREET #24
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32601
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 E. WARREN P 04/21/2008