

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 27, 2005
Secretary of State**

DOCUMENT# N02000007673

Entity Name: 401 SOUTH PALAFOX CONDOMINIUM OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

17 WEST CEDAR STREET SUITE 3
PENSACOLA, FL 32502

New Principal Place of Business:

Current Mailing Address:

17 WEST CEDAR STREET SUITE 3
PENSACOLA, FL 32502

New Mailing Address:

FEI Number: 56-2330131 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARR, JOHN S
17 WEST CEDAR STREET SUITE 3
PENSACOLA, FL 32502 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: DP () Delete
Name: CARR, JOHN S
Address: 17 WEST CEDAR STREET SUITE 3
City-St-Zip: PENSACOLA, FL 32502

Title: DST () Delete
Name: SPENCER, BRIAN K
Address: 17 WEST CEDAR STREET SUITE 3
City-St-Zip: PENSACOLA, FL 32502

Title: D () Delete
Name: MILLS, GERALD D
Address: BEULAH RD
City-St-Zip: PENSACOLA, FL 32526

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 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: JOHN S. CARR

DP

04/27/2005

Electronic Signature of Signing Officer or Director

_____ Date