

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000004152

FILED  
Jul 12, 2006  
Secretary of State

**Entity Name:** WILLISTON PARK CONDOMINIUM ASSOCIATION (LOT 6), INC.

**Current Principal Place of Business:**

3525 WEST LAKE MARY BOULEVARD  
SUITE 306  
LAKE MARY, FL 327463461

**New Principal Place of Business:**

**Current Mailing Address:**

3525 WEST LAKE MARY BOULEVARD  
SUITE 306  
LAKE MARY, FL 327463461

**New Mailing Address:**

**FEI Number:** 57-1179071      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

HARKINS, MATTHEW W  
3525 WEST LAKE MARY BOULEVARD  
SUITE 306  
LAKE MARY, FL 32746 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HARKINS, MATTHEW  
Address: 3525 WEST LAKE MARY BOULEVARD SUITE 306  
City-St-Zip: LAKE MARY, FL 32746

Title: SD ( ) Delete  
Name: HARKINS, MATT  
Address: 3525 WEST LAKE MARY BOULEVARD SUITE 306  
City-St-Zip: LAKE MARY, FL 327463461

Title: STD ( ) Delete  
Name: HARKINS, OLGA  
Address: 2548 STONEVIEW RD  
City-St-Zip: ORLANDO, FL 32806

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: SD (X) Change ( ) Addition  
Name: HARKINS, OLGA  
Address: 2548 STONEVIEW RD  
City-St-Zip: ORLANDO, FL 32806

Title: T ( ) Change (X) Addition  
Name: CAISSIE, LEE  
Address: 2548 WEST LAKE MARY BLVD STE 306  
City-St-Zip: LAKE MARY, FL 32746

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: MATTHEW HARKINS

P

07/12/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date