2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # N03000005597

1. Entity Name

METRO SOUTH EXECUTIVE PARK CONDOMINIUM ASSOCIATION, INC.



FILED Mar 14, 2005 08:00 AM Secretary of State

Principal Place of Business

SIGNATURE:

6260 DUPONT STATION CT., SUITE D JACKSONVILLE, FL 32217

Mailing Address

6260 DUPONT STATION CT., SUITE D JACKSONVILLE, FL 32217



01112005 No Chg-NP

CR2E037 (10/03)

4. FEI Number 26-0067066 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PRICE, CHARLES B 6260 DUPONT STATION CT., SUITE D JACKSONVILLE, FL 32217

DO NOT WRITE IN THIS SPACE

				•••	THE STACE	
	named entity submits this statement for the putions of registered agent.	urpose of changing its registere	d office or re	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered				Agent signature required when reinstating) DATE		
	Filing Fee is \$61.25 Due by May 1, 2005	Election Campaign Finance Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD PRICE, CHARLES B 6260 DUPONT STATION CT., SUITE E JACKSONVILLE, FL 32217			, ,	U00000263317 03/14/05-80091-011 61.25	
TITLE NAME STREET AODRESS CITY-ST-ZIP	D PRICE, SAMUEL 6260 DUPONT STATION CT., SUITE D JACKSONVILLE, FL 32217)		-		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MESNER, HARRY C 6260 DUPONT STATION CT., SUITE D JACKSONVILLE, FL 32217	•	-	DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					•	
THTLE NAME STREET ADDRESS CITY-ST-ZIP	^					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplied the information of the corporation of the receiver for trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.						