2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # N03000007643 1. Entity Name 06 MAR - J AM 11: 38 ST. MARY 18-21 CONDOMINIUM ASSOCIATION, INC. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 11001 DANKA WAY NORTH #3 SAINT PETERSBURG FL 33716 11001 DANKA WAY NORTH #3 SAINT PETERSBURG FL 33716 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 20-0826727 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ROWAN, JAMES J Street Address (P.O. Box Number is Not Acceptable) 3839 4TH STREET NORTH SUITE 390 ST PETERSBURG FL 33703 Zip Code FL 8. The above named entity stubmits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. PD ☐ Delete TITLE TITLE ☐ Change ☐ Addition TYLER, WAT H NAME NAME 100067456561 03/03/06--01020--002 **i STREET ADDRESS 202 INDUSTRIAL PARK LANE STREET ADDRESS COLLIERVILLE TN 38017 CITY-ST-ZIP CITY-ST-ZIP TD ☐ Delete THEF ■ Addition ☐ Change BARGER, MICHAEL E NAME NAME 11001 DANKA WAY NORTH #3 STREET ADDRESS STREET ADDRESS SAINT PETERSBURG FL 33716 CITY-ST-7IP CITY-ST-ZIP TITLE Delete _ TITLE ☐ Changa Addition GORDON, JAY W NAME NAME 202 INDUSTRIAL PARK LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP COLLIERVILLE TN 38017 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME MANNERINO, ERNEST J NAME STREET ADORESS 202 INDUSTRIAL PARK LANE STREET ADDRESS CITY-ST-ZIP COLLIERVILLE TN 38017 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP DITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS City-St-Zip CITY-ST-ZIP

APPHOv. -

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MICHAELE. BARGEN 1-26-06 727-520-77#