2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N03000009284

METRO PARK PROPERTY OWNERS' ASSOCIATION, INC.

6. Name and Address of Current Registered Agent



Principal Place of Business

6000 METROWEST BLVD

111

ORLANDO, FL 32835

Mailing Address

6000 METROWEST BLVD

111

ORLANDO, FL 32835

FILED 06 APR 27 [HII: 4]



DO NOT WRITE IN THIS SPACE

04122006 No Chg-NP

CR2E037 (11/05)

FEI Number			Applied For
02-0722824			Not Applicable
	_ \$8.7	75	Additional

5. Certificate of Status Desired

Fee Required

SKORMAN, MARC

6000 METROWEST BLVD **STE 111** ORLANDO, FL 32835

DO	NOT	WRITE
IN	THIS	SPACE

8. The above the obligat	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	d office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accep
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, 2006	Election Campaign Finance Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			· · · · · · · · · · · · · · · · · · ·
TITLE	D				
NAME	SKORMAN, MARC				
STREET ADDRESS	6000 METROWEST BLVD STE 111			4	00074152234)8/0601018017 **30.62
CITY-ST-ZIP	ORLANDO, FL 32835			95/C	08/0601018017 **30.62
FITLE	D ·				
NAME	SKORMAN, KEVIN				
STREET ADDRESS	6000 METROWEST BLVD STE 111			21	.000741 5 2224
CITY-ST-ZIP	ORLANDO, FL 32835			ក្នុវ	.00074152234 08/0601018018 **30.63
TITLE	D			12101 L	00.00 01010 010 ***00.00
STREET ADDRESS	-SKORMAN, MILTON			-	
CITY-ST-ZIP	6000 METROWEST BLVD STE 111 ORLANDO, FL 32835			DO	NOT WRITE
TITLE	ORLANDO, FL 32835				
NAME				IN	THIS SPACE
STREET ADDRESS	1-1 10				
CITY-ST-ZIP	1818				
TITLE	10.00				
NAME					
STREET ADDRESS	·				
CITY-ST-ZIP					
TITLE					
NAME					
STREET ADDRESS					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 ampowered 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 apdress, with all other like empowered.

CITY-ST-ZIP