2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
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Secretary of State

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1. Entity Name
REGATTA PROFESSIONAL BUILDING CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business
4445 A-1-A HIGHWAY
VERO BEACH, FL 32963

Mailing Address
4445 A-1-A HIGHWAY, SUITE 200
VERO BEACH, FL 32963

DO NOT WRITE IN THIS SPACE

01122006 No Chg-NP CR2E037 (11/05)

4. FEI Number
20-0409509

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CAMPIONE, CHRISTOPHER
31 ROYAL PALM POINTE
VERO BEACH, FL 32960

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10.	OFFICERS AND DIRECTORS
TITLE	PD
NAME	BROWN, RICHARD
STREET ADDRESS	4445 A1A HIGHWAY
CITY-ST-ZIP	VERO BEACH, FL 32963
TITLE	VTD
NAME	CAMPOINE, JOHN
STREET ADDRESS	4445 A-1-A HIGHWAY
CITY-ST-ZIP	VERO BEACH, FL 32963
TITLE	SD
NAME	CAMPIONE, CHRISTOPHER
STREET ADDRESS	4445 A-1-A HIGHWAY
CITY-ST-ZIP	VERO BEACH, FL 32963
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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02/15/06-80047-005 61.25

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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 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: X [signature] John J. Campione X 1-30-06 X 772-978-958
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #