## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000010266

FILED Jaņ 1<u>2, 2</u>008 Secretary of State

Entity Name: ELLIS PARK COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:** New Principal Place of Business:

5800 NW 39TH AVENUE 5800 NW 39TH AVENUE

SUITE 101 STE 101

GAINESVILLE, FL 326066972 US GAINESVILLE, FL 326066972 US

**Current Mailing Address:** New Mailing Address:

5800 NW 39TH AVE 5800 NW 39TH AVENUE

STE 101 STE 101

GAINESVILLE, FL 326066972 US GAINESVILLE, FL 326066972 US

FEI Number: 51-0494181 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BOWERS, PAUL D BOWERS, PAUL D 5800 NW 39TH AVENUE 5800 N.W. 39TH AVENUE

SUITE 101 SUITE 101

GAINESVILLE, FL 326066972 US GAINESVILLE, FL 326066972 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: 01/12/2008

Electronic Signature of Registered Agent Date

City-St-Zip:

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete

GREER III, JOHN W MR BOLTON, ADAM C MR Name: Name: 5800 N.W. 39TH AVENUE SUITE 101 Address: 5800 NW 39TH AVENUE STE 101 Address: City-St-Zip: GAINESVILLE, FL 326066972 US GAINESVILLE, FL 326066972 US

(X) Change ( ) Addition Title: () Delete Title:

Name: WAUGH, TIMOTHY W MR Name: WAUGH, TIMOTHY W MR Address: 5800 N.W. 39TH AVENUE SUITE 101 Address: 5800 NW 39TH AVENUE STE 101 City-St-Zip: GAINESVILLE, FL 326066972 US City-St-Zip: GAINESVILLE, FL 326066972 US

Title: () Delete Title: (X) Change ( ) Addition

BOWERS, PAUL D MR BOWERS, PAUL D MR Name: Name: 5800 N.W. 39TH AVENUE SUITE 101 5800 NW 39TH AVENUE STE 101 Address: Address: City-St-Zip: GAINESVILLE, FL 326066972 US City-St-Zip: GAINESVILLE, FL 326066972 US

I hereby certify that the information supplied with this filing does not qualify 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: PAUL D BOWERS D 01/12/2008