2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2006
Secretary of State

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Entity Name: ANCIENT CITY PLAZA OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

780 N PONCE DE LEON BLVD
ST AUGUSTINE, FL 32084

New Principal Place of Business:

4425 US 1 SOUTH
ST AUGUSTINE, FL 32086

Current Mailing Address:

780 N PONCE DE LEON BLVD
ST AUGUSTINE, FL 32084

New Mailing Address:

3942 A1A SOUTH
ST AUGUSTINE, FL 32080

FEI Number: 20-2679492 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JONES, KATHERINE G
780 N PONCE DE LEON BLVD
ST AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: KELLEY, DONNA M
Address: 116 GRAND OAKS DR
City-St-Zip: ST AUGUSTINE, FL 32080

Title: D ( ) Delete
Name: PIESCO, MICHAEL A
Address: 3433 US HWY 1 S
City-St-Zip: ST AUGUSTINE, FL 32080

Title: D ( ) Delete
Name: ALLIGOOD, JUDY
Address: 3942 A1A SOUTH
City-St-Zip: ST AUGUSTINE, FL 32080

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SHERNO, BOB
Address: 21 J FOUNTAIN OF YOUTH BLVD
City-St-Zip: ST AUGUSTINE, FL 32080

Title: S (X) Change ( ) Addition
Name: ALFORD, CAROL
Address: 1535 SAN RAFEL WAY
City-St-Zip: ST AUGUSTINE, FL 32080

Title: T (X) Change ( ) Addition
Name: PIESCO, MICHAEL
Address: 3433 US 1 SOUTH
City-St-Zip: ST AUGUSTINE, FL 32080

I hereby certify that the information supplied with this filing does not qualify for the 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: BOB SHERNO P 01/25/2006

Electronic Signature of Signing Officer or Director — Date