

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000099

FILED
May 01, 2006
Secretary of State

Entity Name: PLANT CITY COMMERCE CENTER PROPERTY OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

200 LAKE MORTON DRIVE
LAKELAND, FL 33801

New Principal Place of Business:

Current Mailing Address:

200 LAKE MORTON DRIVE
LAKELAND, FL 33801

New Mailing Address:

9887 FOURTH STREET NORTH
SUITE 301
ST.PETERSBURG, FL 33702

FEI Number: 20-1884992 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

RAMPART PROPERTIES, INC.
10033 9TH STREET NORTH - 2ND FLOOR
ST. PETERSBURG, FL 337163804 US

Name and Address of New Registered Agent:

RAMPART PROPERTIES, INC.
9887 FOURTH STREET NORTH
SUITE 301
ST. PETERSBURG, FL 33702 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:

05/01/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BARNETT, HOYT R
Address: 200 LAKE MORTON DRIVE
City-St-Zip: LAKELAND, FL 33801

Title: DVP () Delete
Name: MARTIN, JR., E. SNOW
Address: 200 LAKE MORTON DRIVE
City-St-Zip: LAKELAND, FL 33801

Title: DST () Delete
Name: MOORE, JR., TOM W
Address: 200 LAKE MORTON DRIVE
City-St-Zip: LAKELAND, FL 33801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WILSONQ, MARK R
Address: 9887 FOURTH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33702

Title: VPD (X) Change () Addition
Name: MOORE, TOM
Address: 9887 FOURTH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33702

Title: TD (X) Change () Addition
Name: DUNNE, PHIL
Address: 9887 FOURTH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33702

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: MARK WILSON

PD

05/01/2006

Electronic Signature of Signing Officer or Director

Date