

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001078

FILED
Jan 18, 2007
Secretary of State

Entity Name: EAU GALLIE MOSSWOOD PROFESSIONAL PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2287 WEST EAU GALLIE BLVD
SUITE A
MELBOURNE, FL 32935

New Principal Place of Business:

Current Mailing Address:

2287 WEST EAU GALLIE BLVD
SUITE A
MELBOURNE, FL 32935

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FRESE, GARY B
930 S HARBOR CITY BLVD SUITE 505
MELBOURNE, FL 32901 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: DST () Delete
Name: MOYLES, BRYANT G
Address: 2287 WEST EAU GALLIE BLVD, SUITE A
City-St-Zip: MELBOURNE, FL 32935

Title: DV () Delete
Name: WILLIAMS, MICHAEL H
Address: 2287 WEST EAU GALLIE BLVD, SUITE A
City-St-Zip: MELBOURNE, FL 32935

Title: DP () Delete
Name: WILSON, RICHARD
Address: 2287 WEST EAU GALLIE BLVD
City-St-Zip: MELBOURNE, FL 32935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHAEL H. WILLIAMS

DV

01/18/2007

Electronic Signature of Signing Officer or Director

_____ Date