# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 11, 2006**
**Secretary of State**

DOCUMENT# N05000003670

**Entity Name:** THE PARK HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1550-3 VILLAGE SQUARE BLVD.
TALLAHASSEE, FL 32309

**New Principal Place of Business:**

**Current Mailing Address:**

1550-3 VILLAGE SQUARE BLVD.
TALLAHASSEE, FL 32309

**New Mailing Address:**

**FEI Number: 20-3182527** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

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

MATTICE, WILLIAM T.
1550-3 VILLAGE SQUARE BLVD.
TALLAHASSEE, FL 32309 US

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

MATTICE, WILLIAM T
1550-3 VILLAGE SQUARE BLVD.
TALLAHASSEE, FL 32309 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: WILLIAM T. MATTICE, SR. 04/11/2006
Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:**

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

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

Title: PRES ( ) Change (X) Addition
Name: HUDDLESTON, CARL R
Address: 1550-3 VILLAGE SQUARE BLVD
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: VP/S ( ) Change (X) Addition
Name: MATTICE, WILLIAM T SR
Address: 1550-3 VILLAGE SQUARE BLVD
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: VP/T ( ) Change (X) Addition
Name: THOMAS, KAY W
Address: 1550-3 VILLAGE SQUARE BLVD
City-St-Zip: TALLAHASSEE, FL 32309 US

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: WILLIAM T. MATTICE, SR. VP/S 04/11/2006
Electronic Signature of Signing Officer or Director Date