2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2008
Secretary of State

DOCUMENT# N05000004621

Entity Name: THE VILLAGE AT TOWNPARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434, SUITE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434, SUITE 5000
LONGWOOD, FL 327795044

New Mailing Address:

FEI Number: 20-3470888 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HART, JAMES W JR.
SENTRY MANAGEMENT INC
2180 W SR 434 - STE. 5000
LONGWOOD, FL 327795044 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: PD ( ) Delete
Name: KEPLER, ERIN
Address: 1244 18TH ST
City-St-Zip: SARASOTA, FL 34234

Title: VPD ( ) Delete
Name: ROBERTS, SARA
Address: 8803 MANOR LOOP #201
City-St-Zip: BRADENTON, FL 34202

Title: STD ( ) Delete
Name: BLAISE, KARYN
Address: 7405 VISTA WAY #108
City-St-Zip: BRADENTON, FL 34202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change ( ) Addition
Name: PESNICHAK, JIM
Address: 6166 PALOMINO CIR
City-St-Zip: UNIVERSITY PARK, FL 34201

Title: PD (X) Change ( ) Addition
Name: ROBERTS, SARA
Address: 8803 MANOR LOOP #201
City-St-Zip: BRADENTON, FL 34202

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

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: SARA ROBERTS PD 04/18/2008

Electronic Signature of Signing Officer or Director — Date