2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 02, 2006
Secretary of State

DOCUMENT# N05000004659

Entity Name: THE 18TH STREET PROFESSIONAL PARK II ASSOCIATION, INC.

Current Principal Place of Business:

6550 NORTHWEST 207 PLACE
MCINTOSH, FL 32664

New Principal Place of Business:

4701 NE 42ND AVE
#401
OCALA, FL 34470

Current Mailing Address:

POST OFFICE BOX 298
MCINTOSH, FL 32664

New Mailing Address:

4701 NE 42ND AVE
#401
OCALA, FL 34470

FEI Number: **FEI Number Applied For (X)** **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:

FLANAGAN, GREGORY S ESQ.
2701 SOUTHEAST MARICAMP ROAD
SUITE 104
OCALA, FL 34471 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: BAZEMORE, JOHN L
Address: POST OFFICE BOX 298
City-St-Zip: MCINTOSH, FL 32664

Title: VTD ( ) Delete
Name: BAZEMORE, WILLIAM D
Address: POST OFFICE BOX 298
City-St-Zip: MCINTOSH, FL 32664

Title: D ( ) Delete
Name: JACKSON, SANDRA D
Address: POST OFFICE BOX 298
City-St-Zip: MCINTOSH, FL 32664

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: JOHN L BAZEMORE PRES 08/02/2006
Electronic Signature of Signing Officer or Director — Date