2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006
Secretary of State

DOCUMENT# N05000005433

Entity Name: OSPREY COVE PROFESSIONAL OFFICE PARK ASSOCIATION, INC.

Current Principal Place of Business:

912 E. FLETCHER AVENUE
TAMPA, FL 33612

New Principal Place of Business:

Current Mailing Address:

912 E. FLETCHER AVENUE
TAMPA, FL 33612

New Mailing Address:

FEI Number: 55-0907497 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MATHEW, THOMAS M
912 E. FLETCHER AVENUE
TAMPA, FL 33612 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: PSTD ( ) Delete
Name: MATHEW, THOMAS M
Address: 912 E. FLETCHER AVENUE
City-St-Zip: TAMPA, FL 33612

Title: D ( ) Delete
Name: PITTS, DANIEL L
Address: 19411 GOLDEN SLIPPER PLACE
City-St-Zip: LUTZ, FL 33558

Title: D ( ) Delete
Name: NELSON, ROBERT D
Address: 19113 CROOKED LANE
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: MATHEW, THOMAS M
Address: 912 E. FLETCHER AVENUE
City-St-Zip: TAMPA, FL 33612

Title: PSTD (X) Change ( ) Addition
Name: PITTS, DANIEL L
Address: 19411 GOLDEN SLIPPER PLACE
City-St-Zip: LUTZ, FL 33558

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: THOMAS MATHEW D 04/10/2006

Electronic Signature of Signing Officer or Director — Date