2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007178

FILED Apr 24, 2008 Secretary of State

Entity Name: COLLEGE PARK COMMONS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2405 WEST PRINCETON ST 2251 LYNX LANE

SUITE 9 SUITE 1

ORLANDO, FL 32804 ORLANDO, FL 32804

Current Mailing Address: New Mailing Address:

2405 WEST PRINCETON ST 2251 LYNX LANE

SUITE 9 SUITE 1

ORLANDO, FL 32804 ORLANDO, FL 32804

FEI Number: 20-4435282 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MCNULTY, CHARLES MCNULTY, CHARLES 4333 SILVÉR STAR RD., STE. 175 442 TIMBER RIDGE DR

ORLANDO, FL 32808 US LONGWOOD, FL 32779

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: CHARLES A. MCNULTY 04/24/2008

> Electronic Signature of Registered Agent Date

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

DP (X) Change () Addition () Delete

MCNULTY, CHUCK CHRISTY, ANDREA Name: Name: 2405 WEST PRINCETON ST SUITE 9 Address: 2412 LYNX LANE Address:

City-St-Zip: ORLANDO, FL 32804 City-St-Zip: ORLANDO, FL 32804

Title: () Delete Title: (X) Change () Addition Name:

CARMONA, SCOTT Name: CARMONA, SCOTT Address: 2405 WEST PRINCETON ST SUITE 9 Address: 6004 WEST SIDE SAGINAW RD

City-St-Zip: ORLANDO, FL 32804 City-St-Zip: BAY CITY, MI 48706

Title: DS () Delete Title: (X) Change () Addition HAMMETT, DAVID CREEKMORE, JENNIFER Name: Name:

2405 WEST PRINCETON ST SUITE 9 Address: Address: 2251 LYNX LANE City-St-Zip: ORLANDO, FL 32804 City-St-Zip: ORLANDO, FL 32804

() Delete Title: DT Title: DT (X) Change () Addition

Name: CREEKMORE, JENNIFER Name: CREEKMORE, JENNIFER 2405 WEST PRINCETON ST SUITE 9 Address: Address: 2251 LYNX LANE

City-St-Zip: ORLANDO, FL 32804 City-St-Zip: ORLANDO, FL 32804

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: JENNIFER CREEKMORE DS 04/24/2008