2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008795

FILED Jul 06, 2006 Secretary of State

Entity Name: THE RESERVE AT PERSHING OAKS CONDOMINIUM ASSOCIATION, INC.

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

4439 HECTOR CT. 4408 HECTOR CT. ORLANDO, FL 32822 ORLANDO, FL 32822

Current Mailing Address: New Mailing Address:

4439 HECTOR CT. 4408 HECTOR CT. ORLANDO, FL 32822 ORLANDO, FL 32822

FEI Number: 20-3856921 FEI Number Applied For () 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: Name and Address of New Registered Agent:

F & L CORP. ONE INDEPENDENT DR. SUITE 1300 JACKSONVILLE, FL 32202 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: D/S (X) Change () Addition Name: CRISAFI, ESTEFANO Name: MIGUEL, BREBAN

Address: 243 5TH AVE, NO. 104
City-St-Zip: NEW YORK, NY 10016

Name: Mildoel, Breban
Address: 243 5TH AVE, NO. 104
City-St-Zip: NEW YORK, NY 10016

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

 Name:
 MOGNO, AURELIO
 Name:

 Address:
 243 5TH AVE, NO. 104
 Address:

 City-St-Zip:
 NEW YORK, NY 10016
 City-St-Zip:

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

 Name:
 CLARETTI, CLAUDIO
 Name:

 Address:
 243 5TH AVE, NO. 104
 Address:

 City-St-Zip:
 NEW YORK, NY 10016
 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: MIGUEL BREBAN D/S 07/06/2006