

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000010299

FILED  
Apr 21, 2006  
Secretary of State

**Entity Name:** SAINT CHARLES CONDOMINIUM ASSOCIATION OF GAINESVILLE, INC.

**Current Principal Place of Business:**

821 NW 13TH ST  
STE C  
GAINESVILLE, FL 32601

**New Principal Place of Business:**

5522 NW 43 STREET  
SUITE B  
GAINESVILLE, FL 32653

**Current Mailing Address:**

821 NW 13TH ST  
STE C  
GAINESVILLE, FL 32601

**New Mailing Address:**

5522 NW 43 STREET  
SUITE B  
GAINESVILLE, FL 32653

**FEI Number:** 14-1940586

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRAVOIS, MICHAEL C  
821 NW 13TH ST  
STE C  
GAINESVILLE, FL 32601 US

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

LINDSEY, GLENDA  
C/O BOSSHARDT PROPERTY MGT INC  
5522 NW 43 STREET SUITE B  
GAINESVILLE, FL 32653 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: GLENDA LINDSEY

04/21/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GRAVOIS, MICHAEL C  
Address: 2085 NW 186 LN  
City-St-Zip: CITRA, FL 32113

Title: VPD ( ) Delete  
Name: FORREST, ERIC V  
Address: 1706 SW 35TH PLACE  
City-St-Zip: GAINESVILLE, FL 32608

Title: STD ( ) Delete  
Name: WILD, ROBERT E  
Address: 1706 SW 35TH PLACE  
City-St-Zip: GAINESVILLE, FL 32608

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

Title: PD (X) Change ( ) Addition  
Name: NOFAL, CHARLES  
Address: 10190 SCOTT MILL ROAD  
City-St-Zip: JACKSONVILLE, FL 32257

Title: TD (X) Change ( ) Addition  
Name: DOLLINGER, JEFF  
Address: 18203 SW 42 LANE  
City-St-Zip: NEWBERRY, FL 32669

Title: SD (X) Change ( ) Addition  
Name: MALONEY, MICHAEL  
Address: 16626 SETON  
City-St-Zip: ORLAND PARK, IL 60467

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: CHARLES NOFAL

PD

04/21/2006

Electronic Signature of Signing Officer or Director

Date