2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05168

FILED Mar 28, 2005 Secretary of State

Entity Name: THREE FARRELL PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:			New	New Principal Place of Business:		
701 ENTERPRISES ROAD EAST, STE. 302 PALM HARBOR, FL 34685 US				701 ENTERPRISE ROAD EAST		
			302 PALM	HARBOR, FL 34695	US	
Current Mailing Address:			New	New Mailing Address:		
701 ENTERPRISES ROAD EAST, STE. 302 PALM HARBOR, FL 34685 US			701 E	701 ENTERPRISE ROAD EAST		
			302			
FEI Number:	59-2538948	FEI Number Applied For ()	FEI Number No		tificate of Status Desired ()	
		f Current Registered Agent:		and Address of New	. ,	
Name and	Auuless o	Current Registered Agent.	Name	allu Audiess of New	Registered Agent.	
1964 BAYS	NE, JOSEPI SHORE BLV , FL 34698					
	named enti e of Florida.	ty submits this statement for the	purpose of chan	ing its registered office	or registered agent, or both,	
SIGNATUF	RE:					
	Elect	ronic Signature of Registered Ag	jent		Date	
OFFICERS AND DIRECTORS:			ADDI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	3399 MERN	() Delete ILTZ, MICHAEL IOOR DR,#106 IOR, FL 34685	Title: Name: Addres City-St	s:	nge () Addition	
Title: Name: Address: City-St-Zip:		() Delete ERLY OOR DR,#207 IOR, FL 34685	Title: Name: Addres City-St	5 :	nge () Addition	
Title: Name: Address: City-St-Zip:	3399 MERN	() Delete ILTE, DONNA OOR DR #706 IOR, FL 34685	Title: Name: Addres City-St:	BORGSCHULTE, DC s: 3399 MERMOOR DF	R #106	
Title: Name: Address: City-St-Zip:		() Delete KELLY IOOR DR #107 IOR, FL 34685	Title: Name: Addres City-St	STINSON, LUCILLE S: 3399 MERMOOR DE		
		,				

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL BORGSCHULTE PD 03/28/2005