2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000489

FILED Jul 05, 2007 Secretary of State

Entity Name: LOTS 1-5, GAINESVILLE BUSINESS & TECHNOLOGY PARK CONDOMINIUM ASSOCIATION, INC.

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

6840 NW 225TH STREET 6840 NE 225TH ST. MELROSE, FL 32666 MELROSE, FL 32666

Current Mailing Address: New Mailing Address:

6840 NW 225TH STREET 6840 NE 225TH ST. MELROSE, FL 32666 MELROSE, FL 32666

FEI Number: 20-5024476 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:

 WURN, LAWRENCE J
 WURN, LAWRENCE J

 6840 NW 225TH STREET
 6840 NE 225TH ST.

 MELROSE, FL 32666
 US

 MELROSE, FL 32666
 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: LAWRENCE J WURN 07/05/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:DP () DeleteTitle:DP (X) Change () AdditionName:WURN, LAWRENCE JName:WURN, LAWRENCE JAddress:6840 NW 225TH STREETAddress:6840 NE 225TH ST.

 Address:
 6840 NW 225TH STREET
 Address:
 6840 NE 225TH ST.

 City-St-Zip:
 MELROSE, FL 32666
 City-St-Zip:
 MELROSE, FL 32666

Title: DV () Delete Title: DV (X) Change () Addition Name: WURN, JACQUELINE Name: WURN, JACQUELINE

Address: 6014 SAN JOSE BLVD Address: 6750 EPPING FOREST WAY N, #113

City-St-Zip: JACKSONVILLE, FL 32217 City-St-Zip: JACKSONVILLE, FL 32217

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

Name: WURN, EMILY Name: WURN, EMILY

 Address:
 6014 SAN JOSE BVD
 Address:
 6750 EPPING FOREST WAY N, #113

 City-St-Zip:
 JACKSONVILLE, FL 32217
 City-St-Zip:
 JACKSONVILLE, FL 32217

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: LAWRENCE J WURN DP 07/05/2007