

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000489

FILED
Apr 21, 2008
Secretary of State

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

Current Principal Place of Business:

6840 NE 225TH ST.
MELROSE, FL 32666

New Principal Place of Business:

C/O UNION PROPERTIES ASSOC. MGMT. SERVICES
4421 NW 39 AVE., BLDG 2, SUITE 1
GAINESVILLE, FL 32606

Current Mailing Address:

6840 NE 225TH ST.
MELROSE, FL 32666

New Mailing Address:

P O BOX 357070
GAINESVILLE, FL 32635

FEI Number: 20-5024476

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WURN, LAWRENCE J
6840 NE 225TH ST.
MELROSE, FL 32666 US

Name and Address of New Registered Agent:

UNION PROPERTIES ASSOC. MGMT. SERVICES
4421 NW 39 AVE., BLDG 2, SUITE 1
GAINESVILLE, FL 32606 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: RHONDA DERUS

04/21/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: WURN, LAWRENCE J
Address: 6840 NE 225TH ST.
City-St-Zip: MELROSE, FL 32666

Title: DV () Delete
Name: WURN, JACQUELINE
Address: 6750 EPPING FOREST WAY N, #113
City-St-Zip: JACKSONVILLE, FL 32217

Title: DST () Delete
Name: WURN, EMILY
Address: 6750 EPPING FOREST WAY N, #113
City-St-Zip: JACKSONVILLE, FL 32217

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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

04/21/2008

Electronic Signature of Signing Officer or Director

Date