2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2007
Secretary of State

DOCUMENT# N06000004238

Entity Name: REGAL POINTE PARK NORTH BUILDING THREE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

541 NORTH PALMETTO AVENUE
SUITE 105
SANFORD, FL 32771

New Principal Place of Business:

Current Mailing Address:

541 NORTH PALMETTO AVENUE
SUITE 105
SANFORD, FL 32771

New Mailing Address:

FEI Number: 20-4880384 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SEMANS, RON
541 NORTH PALMETTO AVENUE
SUITE 105
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

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:

Title: PTD ( ) Delete
Name: SEMANS, RON
Address: 550 NORTH PALMETTO AVENUE
City-St-Zip: SANFORD, FL 32771

Title: VD ( ) Delete
Name: HORIAN, ROBERT
Address: 550 NORTH PALMETTO AVENUE
City-St-Zip: SANFORD, FL 32771

Title: SD ( ) Delete
Name: HLAVIN, LAURA
Address: 550 NORTH PALMETTO AVENUE
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition
Name: SEMANS, RON
Address: 541 N. PALMETTO AVE #105
City-St-Zip: SANFORD, FL 32771

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

Title: SD (X) Change ( ) Addition
Name: HLAVIN, LAURA
Address: 541 NORTH PALMETTO AVENUE
City-St-Zip: SANFORD, FL 32771

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: RON SEMANS PTD 03/16/2007

Electronic Signature of Signing Officer or Director — Date