

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000005305

FILED  
Feb 21, 2007  
Secretary of State

**Entity Name:** SUNBELT OFFICE CENTER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

8020 OLD COUNTY ROAD 54  
NEW PORT RICHEY, FL 34653

**New Principal Place of Business:**

2523 SEVEN SPRINGS BLVD.  
NEW PORT RICHEY, FL 34655

**Current Mailing Address:**

8020 OLD COUNTY ROAD 54  
NEW PORT RICHEY, FL 34653

**New Mailing Address:**

2523 SEVEN SPRINGS BLVD.  
NEW PORT RICHEY, FL 34655

**FEI Number:** 20-4988432

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CARLSON, RICHARD  
8020 OLD COUNTY ROAD 54  
NEW PORT RICHEY, FL 34653 US

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

CARLSON, RICHARD  
2523 SEVEN SPRINGS BLVD.  
NEW PORT RICHEY, FL 34655 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: RICHARD CARLSON

02/21/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CARLSON, RICHARD  
Address: 8020 OLD COUNTY ROAD 54  
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: VP ( ) Delete  
Name: CARLSON, TAMARA  
Address: 8020 OLD COUNTY ROAD 54  
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: S/T ( ) Delete  
Name: FAUST, MOLLY  
Address: 8020 OLD COUNTY ROAD 54  
City-St-Zip: NEW PORT RICHEY, FL 34653

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

Title: P (X) Change ( ) Addition  
Name: CARLSON, RICHARD  
Address: 2523 SEVEN SPRINGS BLVD.  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: VP (X) Change ( ) Addition  
Name: CARLSON, TAMARA  
Address: 2523 SEVEN SPRINGS BLVD.  
City-St-Zip: NEW PORT RICHEY, FL 34655

Title: S/T (X) Change ( ) Addition  
Name: FAUST, MOLLY  
Address: 2523 SEVEN SPRINGS BLVD.  
City-St-Zip: NEW PORT RICHEY, FL 34655

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: TAMARA CARLSON

VP

02/21/2007

Electronic Signature of Signing Officer or Director

Date