2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011020

FILED Mar 12, 2007 Secretary of State

Entity Name: SPECIALTY COMMONS I CONDOMINIUM ASSOCIATION, INC.

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

1770 CHINOOK TR. 530 S. RONALD REAGAN BLVD

MAITLAND, FL 32751 116

LONGWOOD, FL 32750

Current Mailing Address: New Mailing Address:

1770 CHINOOK TR. 530 S. RONALD REAGAN BLVD MAITLAND, FL 32751 116

116 LONGWOOD, FL 32750

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

MORRISON, WILLIAM H ESQ. FIGUEIREDO, MARIE T 530 S. RONALD REAGAN BLVD

FERN PARK, FL 32730 US 116 LONGWOOD, FL 32750 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: MARIE T. FIGUEIREDO 03/12/2007

Electronic Signature of Registered Agent Date

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

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

 Name:
 FIGUEIREDO, MARIE T
 Name:
 FIGUEIREDO, MARIE T

 Address:
 1770 CHINOOK TR.
 Address:
 530 S. RONALD REAGAN #116

 City-St-Zip:
 MAITLAND, FL 32751
 City-St-Zip:
 LONGWOOD, FL 32750

Title: VSD () Delete Title: () Change () Addition

 Name:
 MAKSIMOWICZ, ROBERT J
 Name:

 Address:
 530 S. RONALD REGAN BLVD., SUITE 116
 Address:

 City-St-Zip:
 LONGWOOD, FL 32750
 City-St-Zip:

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

 Name:
 FIGUEIREDO, JAMES N
 Name:

 Address:
 1770 CHINOOK TR.
 Address:

 City-St-Zip:
 MAITLAND, FL 32751
 City-St-Zip:

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: MARIE T. FIGUEIREDO P/D 03/12/2007