2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2007
Secretary of State

DOCUMENT# N10817

Entity Name: FOUR FARRELL PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

30337 US 19 NORTH SUITE Q
CLEARWATER, FL 33761

New Principal Place of Business:

2708 ALT. 19 NORTH
SUITE 603
PALM HARBOR, FL 34683

Current Mailing Address:

30337 US 19 NORTH SUITE Q
CLEARWATER,, FL 33761

New Mailing Address:

2708 ALT. 19 NORTH
SUITE 603
PALM HARBOR, FL 34683

FEI Number: 59-2617051 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PMS MANAGEMENT SERVICES, INC.
30337 US 19 NORTH SUITE Q
CLEARWATER, FL 33761 US

Name and Address of New Registered Agent:

PMS MANAGEMENT SERVICES, INC.
2708 ALT. 19 NORTH
SUITE 603
PALM HARBOR, FL 34683 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: COLETTE CILIBERTI 03/13/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: HONOR, AUDREY
Address: 3423 MERMOOR DR #105
City-St-Zip: PALM HARBOR, FL 34685

Title: VP ( ) Delete
Name: GILPIN, VERA
Address: 3423 MERMOOR DR. #206
City-St-Zip: PALM HARBOR, FL 34685

Title: T ( ) Delete
Name: GOOD, GILBERT
Address: 3423 MERMOOR DR, 109
City-St-Zip: PALM HARBOR, FL 34605

Title: S ( ) Delete
Name: BORNOST, VANESSA
Address: 3423 MERWOOD DR, # 306
City-St-Zip: PALM HARBOR, FL 34685

Title: D ( ) Delete
Name: ELMORE, ROBERT
Address: 3423 MERMOOR,# 207
City-St-Zip: PALM HARBOR, FL 34685

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: KRAKOSHKY, CHARLES
Address: 3423 MERMOOR DR #208
City-St-Zip: PALM HARBOR, FL 34685

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

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

Title: S (X) Change ( ) Addition
Name: GOOD, REGGIE
Address: 3423 MERWOOD DR, # 109
City-St-Zip: PALM HARBOR, FL

Title: ( ) Change ( ) Addition
Name:
Address:
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: CHARLES KRAKOSKY PD 03/13/2007
Electronic Signature of Signing Officer or Director Date