2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11699

FILED Jan 31, 2006 Secretary of State

Entity Name: SUNPORT TECHNOLOGICAL CENTER, LTD. OWNER'S ASSOCIATION, INC.

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

7003 PRESIDENTS DRIVE 2966 COMMERCE PARK DRIVE

SUITE 800 SUITE 450

ORLANDO, FL 32809 US ORLANDO, FL 32819 US

Current Mailing Address: New Mailing Address:

7003 PRESIDENTS DRIVE 2966 COMMERCE PARK DRIVE

SUITE 800 SUITE 450

ORLANDO, FL 32809 US ORLANDO, FL 32819 US

FEI Number: 59-3365017 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

COLEMAN, JOHN F COLEMAN, JOHN F

7003 PRESIDENTS DRIVE 2966 COMMERCE PARK DRIVE

SUITE 800 SUTE 450 ORLANDO, FL 32809 US ORLANDO, FL 32819 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: 01/31/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: COLEMAN, JOHN F Name: COLEMAN, JOHN F

Address: 7003 PRESIDENTS DRIVE, STE 800 Address: 2966 COMMERCE PARK DRIVE STE 450

City-St-Zip: ORLANDO, FL 32809 US City-St-Zip: ORLANDO, FL 32819 US

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

Name: RUFRANO, ANTHONY A Name: RUFRANO, ANTHONY A

Address: 7003 PRESIDENTS DRIVE, STE 800 Address: 2966 COMMERCE PARK DRIVE STE 450

City-St-Zip: ORLANDO, FL 32809 City-St-Zip: ORLANDO, FL 32819

Title: DST () Delete Title: DST (X) Change () Addition Name: NORRINGTON, SHIRLEY F NORRINGTON, SHIRLEY F

Address: 7003 PRESIDENTS DRIVE, STE 800 Address: 2966 COMMERCE PARK DRIVE STE 450

City-St-Zip: ORLANDO, FL 32809 City-St-Zip: ORLANDO, FL 32819

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: JOHN F. COLEMAN PD 01/31/2006