2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

Mar 28, 2008 8:00 am Secretary of State **DOCUMENT # N14869** 1. Entity Name 03-28-2008 90043 047 ****61.25 O.N.C. INDUSTRIAL CENTER CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 6691-A 33RD ST. EAST 6721-A 33RD ST, E 50002204 SARASOTA, FL 34243 SARASOTA, FL 34243 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01242008 Chg-NP CR2E037 (12/06) 4. FEI Number 65-0856122 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HARMOUNT, JACK 6691 33RD ST EAST Street Address (P.O. Box Number is Not Acceptable) SARASOTA, FL 34243 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Stansture, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2008 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. MLE ☐ Delete TITLE ☐ Change Addition HARMOUNT, JACK NAME STREET ADDRESS 6691 33RD ST EAST STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34243 CITY-ST-ZIP VPD ☐ Delete TITLE ☐ Change ☐ Addition RONE, RICK **6721B 33RD ST EAST** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34243 CITY - ST - ZIP TITLE □ Delete TITLE ☐ Change Addition NAME LEWIS, ANGELA NAME STREET ADDRESS **6721 A 33RD ST EAST** STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34243 CITY-ST-ZIP DIRECTOR TITLE Delete **Addition** TITLE NAME NAME HARMOUNT, KENT 6691 33RD ST EAST STREET ADDRESS STREET ADDRESS SARA SOTA FL 34243 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TETLE Channe Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jack Harmount, President 3/18/08

FILED