
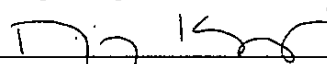
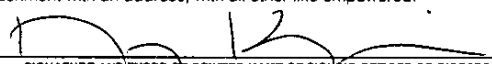


**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 28, 2005 8:00 am**  
**Secretary of State**

04-28-2005 90221 020 \*\*\*\*61.25

<b>DOCUMENT # N16811</b>					
1. Entity Name METROPOLITAN 5A CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 1624 METROPOLITAN CIRCLE., STE B TALLAHASSEE, FL 32308		Mailing Address 1624 METROPOLITAN CIRCLE., STE B TALLAHASSEE, FL 32308			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-3187358	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
WEST, ANDREA 1624 METROPOLITAN CIRCLE., STE B TALLAHASSEE, FL 32308			Name Nancy Krzycki Street Address (P.O. Box Number is Not Acceptable) 1624 Metropolitan Circle, Ste B City Tallahassee FL Zip Code 32308		
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 			(NOTE: Registered Agent signature required when reinstating)		DATE 4/27/05
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	VD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BEVAN, LAURA A	NAME			
STREET ADDRESS	1624 METROPOLITAN CIRCLE., STE B	STREET ADDRESS			
CITY-ST-ZIP	TALLAHASSEE, FL 32308	CITY-ST-ZIP			
TITLE	SD <input checked="" type="checkbox"/> Delete	TITLE	SD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	CALHOUN, LYNDA E	NAME	Brian K. Anderson		
STREET ADDRESS	P.O. BOX 4255	STREET ADDRESS	1624 Metropolitan Circle, Ste A		
CITY-ST-ZIP	TALLAHASSEE, FL 32315	CITY-ST-ZIP	Tallahassee FL 32308		
TITLE	PD <input checked="" type="checkbox"/> Delete	TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SMITH, WL JR	NAME	Robert S. Jett Jr.		
STREET ADDRESS	P.O. BOX 4255	STREET ADDRESS	1624 Metropolitan Circle, Ste A		
CITY-ST-ZIP	TALLAHASSEE, FL 32315	CITY-ST-ZIP	Tallahassee FL 32308		
TITLE	TD <input checked="" type="checkbox"/> Delete	TITLE	TD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	WELLS, ANDREA	NAME	Nancy Krzycki		
STREET ADDRESS	1624 METROPOLITAN CIRCLE., STE B	STREET ADDRESS	1624 Metropolitan Circle, Ste B		
CITY-ST-ZIP	TALLAHASSEE, FL 32308	CITY-ST-ZIP	Tallahassee FL 32308		
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY-ST-ZIP		CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: 			Date 4/27/05		Daytime Phone # 850-386-3435
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		Daytime Phone #