2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 27, 2006 8:00 am Secretary of State DOCUMENT # N18769 1. Entity Name 04-27-2006 90174 010 ****61.25 PICKETT'S PARK PROPERTY OWNERS' ASSOCIATION, Principal Place of Business Mailing Address 9199 NAKOMA WAY 9199 NAKOMA WAY **BROOKSVILLE FL 34613 BROOKSVILLE FL 34613** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State Applied For 4. FEI Number 59-2787945 Not Applicable Zip Country 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 DE VICO, JANET Street Address (P.O. Box Number is Not Acceptable) 8188 STURBRIDGE COURT, BROOKSVILLE FL 34613 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 是是不是物心。此為 FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. 13 TITLE ☐ Delete TITLE Change Addition DE VICO, JANET NAME NAME 8188 STURBRIDGE CT STREET ADDRESS STREET ADDRESS **BROOKSVILLE FL 34613** CITY-ST-ZIP CITY-ST-ZIP TITLE DVP ☐ Delete TITLE ☐ Change Addition TEGNANELLI, PAT NAME NAME STREET ADDRESS 8032 PICKETTS COURT STREET ADDRESS CITY-ST-ZIP BROOKSVILLE FL 34613 CITY-ST-7IP Addition Delete. ☐ Change SALADINO, RITA NAME NAME STREET ADDRESS 7338 GLENN COVE RD STREET ADDRESS CITY-ST-7IP BROOKSVILLE FL 34613 CITY-ST-ZIP VD TITLE Delete TITLE ☐ Change Addition ZANNI, PETER NAME NAME STREET ADDRESS 9376 NAKOMA WAY STREET ADDRESS BROOKSVILLE FL 34613 CITY-ST-ZIP CITY-ST-ZIP DT TITLE Delete THILE ☐ Change ☐ Addition CAMERON, KEVIN NAME NAME 9478 NAKOMA WAY STREET ADDRESS STREET ADDRESS BROOKSVILLE FL 34613 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 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, Floriga Statutes; and that my name appears in Block 10 or Block 11

of the corporation or the receiver or trustee empowered to execute this report as if changed, or on an attachment with an address, with all other like empowered

SIGNATURÉ

FILED