2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22330

FILED Mar 23, 2009 Secretary of State

Entity Name: REGENCY PARK CONDOMINIUM OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 2100 FOREST DR. INVERNESS, FL 34453 **Current Mailing Address: New Mailing Address:** 2100 FOREST DR INVERNESS, FL 34453 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BALTHIS, BILL W 2100 FOREST DR. INVERNESS, FL 34453 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BALTHIS, BILL W Name: Name: 2066 FOREST DRIVE Address: Address: City-St-Zip: INVERNESS, FL 34453 City-St-Zip: Title: Title: VP/T () Delete (X) Change () Addition LUTZ, CAROL Name: LUTZ, CAROL Name: Address: 2068 FOREST DR. Address: 2068 FOREST DR. City-St-Zip: INVERNESS, FL 34453 City-St-Zip: INVERNESS, FL 34453 Title: S/T () Delete Title: RS (X) Change () Addition FISHER, TERRY KENADY, DONNA Name: Name: 2014 FOREST DR. Address: Address: 2014 FOREST DR. City-St-Zip: INVERNESS, FL 34453 City-St-Zip: INVERNESS, FL 34453 () Delete Title: Title: (X) Change () Addition Name: PAGE, DONNA Name: PAGE, DONNA 2308 FOREST DRIVE 2308 FOREST DRIVE Address: Address: City-St-Zip: INVERNESS, FL 34453 City-St-Zip: INVERNESS, FL 34453 Title: () Delete Title: (X) Change () Addition DEPAPS, DARCIA J OSBREY, MARJORIE Name: Name: 2358 FOREST DRIVE 2022 FOREST DRIVE Address: Address: City-St-Zip: INVERNESS, FL 34453 City-St-Zip: INVERNESS, FL 34453

I hereby certify that the information supplied with this filing does not qualify 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: BILL W BALTHIS P 03/23/2009