2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N22821

1. Entity Name

UNIVERSITY PARK OF COMMERCE OWNERS' ASSOCIATION, INC.



Principal Place of Business

Malling Address

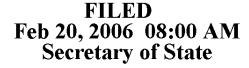
15051 S. TAMIAMI TRAIL SUITE 203 FORT MYERS, FL 33908

15051 S. TAMIAMI TRAIL

SUITE 203

STOROATURE AND TYPED OR PRINTED NAME OF SKIMING OFFICER OR DIFECTOR

FORT MYERS, FL 33908





DO NOT WRITE IN THIS SPACE

02142006 No Chg-NP CRZE037 (11/05)

4. FEI Number 65-0205660

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Daytme Phone #

8. Name and Address of Current Registered Agent

THOMPSON, STEPHEN 1205 MANATEE AVENUE WEST BRADENTON, FL 34205

SIGNATURE:

DO NOT WRITE IN THIS SPACE

			III IIIIO OI AGE		
8. The above the obligat	named entity submits this statement for the ions of registered agent.	ourpose of changing its registered off	ice or r	egistered agent, or bo	ith, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or practed reme of regretared agent and the	d storumble. (NETT: Renistered Acres		required when remaining)	CATE
		a spiritual (and the spiritual spir		required and recursioning)	DOTA
	Filing Fee is \$61.25 Due by May 1, 2006	Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS EXTY-ST-ZP	PD ADKINS, EDWARD D 15051 S. TAMIAMI TRAIL, #203 FORT MYERS, FL 33908				U00000440073
TITLE HAME STREET ADDRESS CITY-ST-ZP	D GARRITY, PAUL G 15051 S. TAMIAMI TRAIL, #203 FORT MYERS, FL 33908				8447/06-80026-020 61,25
TITLE NAME STREET ADDRESS CHTY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-57-2P				IN '	THIS SPACE
TITLE RAME STREET AUGRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filling 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 earne 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 517, 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.					