2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2005
Secretary of State

DOCUMENT# N23098

Entity Name: PARC CORNICHE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6300 PARC CORNICHE DR.
ORLANDO, FL 32821

New Principal Place of Business:

Current Mailing Address:

6300 PARK CORNICHE DR
ORLANDO, FL 32821

New Mailing Address:

6300 PARC CORNICHE DR
ORLANDO, FL 32821

FEI Number: 59-2983452 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NYKAMP, JAMES P
6300 PARC CORNICHE DRIVE
ORLANDO, FL 32821 US

Name and Address of New Registered Agent:

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:

Title: DP ( ) Delete
Name: DEMKO, JOSEPH G
Address: 6300 PARK CORNICHE DR
City-St-Zip: ORLANDO, FL 32821

Title: D ( ) Delete
Name: AMPER, ALEX
Address: 6300 PARK CORNICHE DR
City-St-Zip: ORLANDO, FL 32821

Title: SD ( ) Delete
Name: GOLDFARB, ALAN
Address: 6300 PARK CORNICHE DR
City-St-Zip: ORLANDO, FL 32821

Title: D ( ) Delete
Name: NILES, THOMAS
Address: 6300 PARK CORNICHE DR
City-St-Zip: ORLANDO, FL 32821

Title: TD ( ) Delete
Name: VIGGIANO, WILLIAM
Address: 40 WEST ROAD
City-St-Zip: CLINTON, CT 06413

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: BOHYN, CHRISTIAN
Address: 6300 PARK CORNICHE DR
City-St-Zip: ORLANDO, FL 32821

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOSEPH G DEMKO P 02/10/2005

Electronic Signature of Signing Officer or Director — Date