2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33641

FILED Jan 08, 2007 Secretary of State

Entity Name: COLONY PARK COMMUNITY ASSOCIATION, INC.

| Current Principal Place of Business: | | | New Principal Place o | New Principal Place of Business: | |
|---|--|---|---|---|--|
| PO BOX 3 GAINESVI | 857658 ILLE, FL 32635 | US | | | |
| Current N | lailing Address | s: | New Mailing Address: | | |
| PO BOX 3 GAINESVI | 857658 ILLE, FL 32635 | US | | | |
| FEI Number | : 59 -2 969044 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and | d Address of C | urrent Registered Agent: | Name and Address of | New Registered Agent: | |
| 1755 NW GAINESVI The above | ILLE, FL 32605 | US ubmits this statement for the p | urpose of changing its registered | office or registered agent, or both, | |
| SIGNATU | RE: | | | | |
| | | c Signature of Registered Age | nt | Date | |
| OFFICERS AND DIRECTORS: | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS | | |
| | | | | | |
| √ame: √ddress: | P () REYNOLDS, RIC 1615 NW 16TH I GAINESVILLE, F | DRIVE | Title: (Name: Address: City-St-Zip: |) Change ()Addition | |
| Name: Address: City-St-Zip: Fitle: Name: Address: | REYNOLDS, RIC 1615 NW 16TH I GAINESVILLE, F | CK DRIVE EL 32605 Delete IY W LN | Name: Address: City-St-Zip: |) Change () Addition) Change () Addition | |
| Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: City-St-Zip: Address: City-St-Zip: | REYNOLDS, RIG 1615 NW 16TH I GAINESVILLE, F T () FIELD, DOROTH 1755 NW 17TH I GAINESVILLE, F | CK DRIVE CL 32605 Delete HY W LN CL 32605 Delete | Name: Address: City-St-Zip: Title: (Name: Address: City-St-Zip: | | |
| Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: | REYNOLDS, RIC 1615 NW 16TH I GAINESVILLE, F T () FIELD, DOROTH 1755 NW 17TH I GAINESVILLE, F D () FANN, SUSAN 1716TH NW 16T GAINESVILLE, F | CK DRIVE EL 32605 Delete HY W LN EL 32605 Delete H PL EL 32605 Delete LANE | Name: Address: City-St-Zip: Title: (Name: Address: City-St-Zip: Title: (Name: Address: City-St-Zip: |) Change () Addition) Change () Addition X) Change () Addition I TH LANE | |

I hereby certify that the information supplied with this filing does not qualify for the 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: DOROTHY FIELD T 01/08/2007