


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 18, 2005 08:00 AM
Secretary of State

DOCUMENT # N40375 1. Entity Name OCOEE COMMERCIAL PARK PROPERTY OWNERS' ASSOCIATION, INC.	
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Principal Place of Business 2741 CULLENS COURTE OCOEE, FL 34761 US	Mailing Address 2741 CULLENS COURTE OCOEE, FL 34761 US
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DO NOT WRITE IN THIS SPACE



03182005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-3040649	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fees Required
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6. Name and Address of Current Registered Agent DANIELS, D JERE F 200 W WELBOURNE SUITE 4 WINTER PARK, FL 32789

DO NOT WRITE IN THIS SPACE

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WINGATE, DONALD A. 110 MERICAM COURT KILLARNEY, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KRISAN, JEFF 2313 ROAT DR. ORLANDO, FL 32835
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BURLINGHAM, BILL 2741 CULLEN COURTE OCOEE, FL 34761
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

<p>U00000373150 07/18/05-80004-005 61.25</p> DO NOT WRITE IN THIS SPACE
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  JEFF KRISAN 7/15/05 407-347-0449	Date Daytime Phone #
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