2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Mar 25, 2005 08:00 AM Secretary of State DOCUMENT # N47810 1. Entity Name QDTTAGES OF COLLEGE PARK CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address **500 RUGBY ST** 1016 CAMPBELL ST. ORLANDO, FL 32806 ORLANDO, FL 32804 US 01132005 No Chg-NP CR2E037 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number NOT APPLICABLE Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent REBER, JOHN C. DO NOT WRITE 109 E CHURCH ST FIFTH FLOOR IN THIS SPACE ORLANDO, FL 32801-3391 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. Signature, typed or printed name of registered agent and little if applicable. (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 Trust Fund Contribution. Added to Fees Due by May 1, 2005 OFFICERS AND DIRECTORS 10. TITLE DP Un0000276440 03/35/05-80040-022 61.25 NAME GAY, GERALD A JR STREET ADDRESS 1016 CAMPBELL ST CITY-ST-7IP ORLANDO, FL DST TITLE GAY, CARLA J STREET ADDRESS 1016 CAMPBELL ST CITY-ST-ZIP ORLANDO, FL TITLE NAME REBER, JOHN C STREET ADDRESS 966B F MICHIGAN ST DO NOT WRITE CITY-ST-ZIP ORLANDO, FL IN THIS SPACE INLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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:

CITY-ST-ZIP

THE THE OR PHINTED NAME OF SIGNING OF STREET ON DIRECTOR

3/23/05

407 963-8416

FILED