2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002034

FILED Apr 03, 2005 Secretary of State

Entity Name: THE GEMS OF ROCKLEDGE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 720 ROY WALL BLVD ROCKLEDGE, FL 32955 US **Current Mailing Address: New Mailing Address:** 720 ROY WALL BLVD ROCKLEDGE, FL 32955 US FEI Number: 59-3189480 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BONNETTE, RICHARD 1307 GEM CIRCLE ROCKLEDGE, FL 32955 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: PTD (X) Change () Addition () Delete BAR-NAVON, HAIM BAR-NAVON, HAIM Name: Name: 1308 GEMS CIRCLE Address: 1308 GEMS CIRCLE Address: City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: ROCKLEDGE, FL 32955 Title: DAS () Delete Title: () Change () Addition BAR-NAVON, ZIVA Name: Name: Address: 1308 GEM CIRCLE Address: City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: Title: **VPSD** () Delete Title: PD (X) Change () Addition BONNETTE, RICHARD BONNETTE, RICHARD Name: Name: Address: 1307 GEM CIRCLE Address: 1307 GEM CIRCLE City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: ROCKLEDGE, FL 32955 Title: () Delete Title: DS () Change (X) Addition Name: Name: TOMKOSKI, HELEN 1301 GEM CIRCLE Address: Address: City-St-Zip: City-St-Zip: ROCKLEDGE, FL 32955 Title: () Delete Title: () Change (X) Addition BUTTON, VERA Name: Name: 1306 GEM CIRCLE Address: Address: City-St-Zip: City-St-Zip: ROCKLEDGE, FL 32955

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: HAIM BAR-NAVON VP 04/03/2005