2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000783

FILED Mar 22, 2006 Secretary of State

Entity Name: ORLANDO/CENTRAL FLORIDA CHAPTER OF THE NATIONAL ASSOCIATION OF RESIDENTIAL

PROPERTY MANAGERS, INC.

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 56

WINTER PARK, FL 327900056

Current Mailing Address: New Mailing Address:

P.O. BOX 56 3834 E MICHIGAN STREET WINTER PARK, FL 327900056 ORLANDO, FL 32812

FEI Number: 59-3334133 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:

SOLER, THAIS R 3834 E. MICHIGAN ST ORLANDO, FL 32812 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:

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Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 () Delete
 Title:
 P
 (X) Change () Addition

 Name:
 BOLES, JILL
 Name:
 THOMPSON, FRED

 Address:
 1120 EGAN DR
 Address:
 3834 E MICHIGAN STREET

City-St-Zip: ORLANDO, FL 328225938 City-St-Zip: ORLANDO, FL 32812

Title: PD () Delete Title: PD (X) Change () Addition Name: PARKER, TERESA Name: BOLES, JILL

 Address:
 9816 E COLONIAL DR
 Address:
 1112 EGAN DRIVE

 City-St-Zip:
 ORLANDO, FL 32817
 City-St-Zip:
 ORLANDO, FL 328225938

Title: VPT () Delete Title: VPT (X) Change () Addition

 Name:
 MEEKS, ROBERT
 Name:
 BLAKE, DIANA

 Address:
 460 SEMORAN BLVD #104
 Address:
 4515 CURRY FORD RD

 City-St-Zip:
 CASSELBERRY, FL 337074938
 City-St-Zip:
 ORLANDO, FL 32812

Title: TD () Delete Title: () Change () Addition

 Name:
 SOLER, THAIS R
 Name:

 Address:
 3854 E. MICHIGAN ST
 Address:

 City-St-Zip:
 ORLANDO, FL 32812
 City-St-Zip:

Title: ST () Delete Title: () Change () Addition

 Name:
 ROBERTS, MARTY
 Name:

 Address:
 PO BOX 1408
 Address:

 City-St-Zip:
 MOUNT DORA, FL 32756
 City-St-Zip:

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: THAIS R SOLER TD 03/22/2006