2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N97000002423

Jul 14, 2005 Secretary of State

Entity Name: CONGRESS PROFESSIONAL CENTER PROPERTY OWNERS ASSOCIATION, INC.

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

3801 PGA BOULEVARD SUITE 600

PALM BEACH GARDENS, FL 33410 US

New Mailing Address: Current Mailing Address:

3801 PGA BOULEVARD SUITE 600

PALM BEACH GARDENS, FL 33410 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

REGSERV CORP GARDENS CORPORATE CENTER 3801 PGA BOULEVARD SUITE 600 PALM BEACH GARDENS, FL 33410 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:

() Delete () Change () Addition

NOTO, MICHAEL A Name: Name: 3801 PGA BOULEVARD SUITE 600 Address:

Address: City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip:

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

DISALVO, PATRICK J Name: EVANS, JOHN D Name:

Address: 3801 PGA BOULEVARD SUITE 600 Address: 3801 PGA BOULEVARD SUITE 600 City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: DST () Delete Title: STD (X) Change () Addition

BROWN, MICHAEL DUNLAY, BRIAN Name: Name:

3801 PGA BOULEVARDS, SUITE 600 3801 PGA BOULEVARDS, SUITE 600 Address: Address: City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: PALM BEACH GARDENS, FL 33410

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: JOHN D EVANS VP 07/14/2005