## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 10, 2006

Name and Address of Current Registered Agent:  PLATOCK, NEIL  C/O RUDEN, MCCLOSKEY ET AL  222 LAKEVIEW AVENUE, SUITE 800  WEST PALM BEACH, FL 33401 US  The above named entity submits this statement for the purpose of changing its registered office or registered agen in the State of Florida.  SIGNATURE:  Electronic Signature of Registered Agent  Date	JUMEN 1# N9/00002883	Secretary of St	tate
% P.O. BOX 1491 MERCER ISLAND, WA 98040  Current Mailing Address:  222 LAKEVIEW AVENUE, SUITE 800 WEST PALM BEACH, FL 33401  FEI Number: 65-0804270 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desi Name and Address of Current Registered Agent:  Name and Address of New Registered Agent PLATOCK, NEIL C/O RUDE'N, MCCLOSKEY ET AL 222 LAKEVIEW AVENUE, SUITE 800 WEST PALM BEACH, FL 33401 US  The above named entity submits this statement for the purpose of changing its registered office or registered agen in the State of Florida.  SIGNATURE:  Electronic Signature of Registered Agent  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:  Title: PD ( ) Delete Name: LEWIS, GEORGE Address:  Address:	Name: PETSMART PLAZA ASSOCIATION, INC.		
Current Mailing Address:  222 LAKEVIEW AVENUE, SUITE 800 WEST PALM BEACH, FL 33401  FEI Number: 65-0804270 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desi  Name and Address of Current Registered Agent:  Name and Address of New Registered Agent  PLATOCK, NEL C/O RUDEN, MCCLOSKEY ET AL 222 LAKEVIEW AVENUE, SUITE 800 WEST PALM BEACH, FL 33401 US  The above named entity submits this statement for the purpose of changing its registered office or registered agen in the State of Florida.  SIGNATURE:  Electronic Signature of Registered Agent  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRITIE:  Name: LEWIS, GEORGE Address:  New Mailing Address:	nt Principal Place of Business:	New Principal Place of Business:	
222 LAKEVIEW AVENUE, SUITE 800 WEST PALM BEACH, FL 33401  FEI Number: 65-0804270 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desi Name and Address of Current Registered Agent: Name and Address of New Registered Agent PLATOCK, NEIL C/O RUDEN, MCCLOSKEY ET AL 222 LAKEVIEW AVENUE, SUITE 800 WEST PALM BEACH, FL 33401 US  The above named entity submits this statement for the purpose of changing its registered office or registered agen in the State of Florida.  SIGNATURE:  Electronic Signature of Registered Agent  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DITTIE: ( ) Change ( ) Addition Name: LEWIS, GEORGE Address: PO BOX 1491  Address: Address:			
WEST PALM BEACH, FL 33401  FEI Number: 65-0804270 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desi  Name and Address of Current Registered Agent: Name and Address of New Registered Agent  PLATOCK, NEIL  C/O RUDEN, MCCLOSKEY ET AL  222 LAKEVIEW AVENUE, SUITE 800  WEST PALM BEACH, FL 33401 US  The above named entity submits this statement for the purpose of changing its registered office or registered agen in the State of Florida.  SIGNATURE:  Electronic Signature of Registered Agent  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DITITLE:  ( ) Change ( ) Addition  Name: LEWIS, GEORGE  Address: PO BOX 1491	nt Mailing Address:	New Mailing Address:	
Name and Address of Current Registered Agent:  PLATOCK, NEIL C/O RUDEN, MCCLOSKEY ET AL 222 LAKEVIEW AVENUE, SUITE 800 WEST PALM BEACH, FL 33401 US  The above named entity submits this statement for the purpose of changing its registered office or registered agen in the State of Florida.  SIGNATURE:  Electronic Signature of Registered Agent  Date  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:  Title: PD () Delete Title: () Change () Addition Name: LEWIS, GEORGE Name: Address: PO BOX 1491  Address: Address:			
PLATOCK, NEIL C/O RUDEN, MCCLOSKEY ET AL 222 LAKEVIEW AVENUE, SUITE 800 WEST PALM BEACH, FL 33401 US  The above named entity submits this statement for the purpose of changing its registered office or registered agen in the State of Florida.  SIGNATURE:  Electronic Signature of Registered Agent  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IT Itle: () Change () Addition Name: LEWIS, GEORGE Name: Address: PO BOX 1491  Address: Address:	mber: 65-0804270 FEI Number Applied For() FEI	Number Not Applicable ( ) Certificate of Status Desired	( )
C/O RUDÉN, MCCLOSKEY ET AL 222 LAKEVIEW AVENUE, SUITE 800 WEST PALM BEACH, FL 33401 US  The above named entity submits this statement for the purpose of changing its registered office or registered agen in the State of Florida.  SIGNATURE:  Electronic Signature of Registered Agent  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Title: () Change () Addition Name: LEWIS, GEORGE Name: Address: PO BOX 1491  Address: Address:	and Address of Current Registered Agent:	Name and Address of New Registered Agent:	
in the State of Florida.  SIGNATURE:  Electronic Signature of Registered Agent  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS AND DIRECTORS:  Title: PD () Delete Title: () Change () Addition Name: LEWIS, GEORGE Name: Address: PO BOX 1491  Address:	RUDÉN, MCCLOSKEY ET AL AKEVIEW AVENUE, SUITE 800		
Electronic Signature of Registered Agent  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:  Title: PD () Delete Title: () Change () Addition Name: LEWIS, GEORGE Name: Address: PO BOX 1491  Address:		e of changing its registered office or registered agent, o	r both,
OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:  Title: PD () Delete Title: () Change () Addition Name: LEWIS, GEORGE Name: Address: PO BOX 1491 Address:	ATURE:		
Title: PD () Delete Title: () Change () Addition Name: LEWIS, GEORGE Name: Address: PO BOX 1491 Address:	Electronic Signature of Registered Agent	Date	
Name: LEWIS, GEORGE Name: Address: PO BOX 1491 Address:	CERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRI	ECTORS:
	LEWIS, GEORGE s: PO BOX 1491	Name: Address:	
Title: TD ( ) Delete Title: ( ) Change ( ) Addition Name: CHRISTIAN, KIRBY Name: Address: 310 WEST SPRUCE Address: City-St-Zip: MISSOULA, MT 59802 City-St-Zip:	CHRISTIAN, KÍRBY s: 310 WEST SPRUCE	Name: Address:	

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: GEORGE D. LEWIS PD 01/10/2006