

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004340

FILED
Apr 25, 2006
Secretary of State

Entity Name: LYNMAR COMMERCE PARK ASSOCIATION, INC.

Current Principal Place of Business:

3434 COLWELL AVE.
SUITE 200
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

3434 COLWELL AVE.
SUITE 200
TAMPA, FL 33614 US

New Mailing Address:

FEI Number: 59-3511073

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIZZETTA & COMPANY, INC.
3434 COLWELL AVE.
SUITE 200
TAMPA, FL 33614 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: LYNN, ANDREW
Address: 1311 N. CHURCH AVENUE
City-St-Zip: TAMPA, FL 33607

Title: TD () Delete
Name: MEARS, RANDY
Address: P.O. BOX 1175
City-St-Zip: OLDSMAR, FL 34677

Title: S (X) Delete
Name: OWENS, DICK
Address: 13901 LYNMAR BLVD.
City-St-Zip: TAMPA, FL 33626

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P-D (X) Change () Addition
Name: LYNN, ANDREW
Address: 221 TURNER STREET
City-St-Zip: CLEARWATER, FL 33756

Title: ST-D (X) Change () Addition
Name: MEARS, RANDY
Address: 12645 RACE TRACK RD.
City-St-Zip: TAMPA, FL 33626

Title: () Change () Addition
Name: _____
Address: _____
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: ANDREW LYNN

P-D

04/25/2006

Electronic Signature of Signing Officer or Director

Date