2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006271

FILED Apr 29, 2005 Secretary of State

Entity Name: MCINTOSH PARK OF COMMERCE PROPERTY OWNER'S ASSOCIATION, INC.

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

1343 LANDINGS BLVD. SARASOTA, FL 34231

Current Mailing Address: New Mailing Address:

P.O. BOX 20557 SARASOTA, FL 342763557

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:

VAN WINKLE, MARY E 2815 PROCTOR ROAD SARASOTA, FL 34231

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

US

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 MARTIN, JR, RICHARD C
 Name:
 MARIOTTI, DEBBIE

 Address:
 P.O. BOX 20557
 Address:
 4559 MARIOTTI COURT

 City-St-Zip:
 SARASOTA, FL 34276
 City-St-Zip:
 SARASOTA, FL 34233

Title: ST () Delete Title: VP/S (X) Change () Addition Name: MARTIN, PATRICIA A Name: MARTIN, JR, RICHARD C

 Address:
 P.O. BOX 20557
 Address:
 P.O. BOX 20557

 City-St-Zip:
 SARASOTA, FL 34276
 City-St-Zip:
 SARASOTA, FL 34276

Title: VP () Delete Title: T (X) Change () Addition

 Name:
 BUCKELEW, RICHARD A
 Name:
 MARIOTTI, WILLIAM J

 Address:
 59 SARASOTA CENTER BLVD.
 Address:
 4559 MARIOTTI COURT

 City-St-Zip:
 SARASOTA, FL 34240
 City-St-Zip:
 SARASOTA, FL 34233

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: DEBBIE MARIOTTI P 04/29/2005