

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006039

FILED  
Apr 20, 2005  
Secretary of State

**Entity Name:** MADISON PARK OFFICE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

502 NW 16TH AVENUE  
GAINESVILLE, FL 32609

**New Principal Place of Business:**

502 NW 16TH AVENUE  
GAINESVILLE, FL 32601

**Current Mailing Address:**

502 NW 16TH AVENUE  
GAINESVILLE, FL 32609

**New Mailing Address:**

502 NW 16TH AVENUE  
GAINESVILLE, FL 32601

**FEI Number:** 59-3586023

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CARPENTER, RONALD A  
5608 NW 43RD STREET  
GAINESVILLE, FL 32653 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: WARREN, MICHAEL E  
Address: 7201 NW 28TH AVE  
City-St-Zip: GAINESVILLE, FL 32606

Title: VTD ( ) Delete  
Name: BUCHANAN, SCOTT A  
Address: 3744 SW 56TH RD  
City-St-Zip: GAINESVILLE, FL 32608

Title: SD ( ) Delete  
Name: KABLER, PHILIP N  
Address: 3011 NW 25TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32605

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: WARREN, MICHAEL E  
Address: 7115 NW 28TH AVE  
City-St-Zip: GAINESVILLE, FL 32606

Title: VTD (X) Change ( ) Addition  
Name: BUCHANAN, SCOTT A  
Address: 9313 SW 53TH LANE  
City-St-Zip: GAINESVILLE, FL 32608

Title: SD (X) Change ( ) Addition  
Name: KABLER, PHILIP N  
Address: 7418 WHITE OAKS ROAD  
City-St-Zip: ALACHUA, FL 32615

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: MICHAEL E. WARREN

PD

04/20/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date