

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006653

FILED
Jan 19, 2005
Secretary of State

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

Current Principal Place of Business:

2025 LAGUNA WAY
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

2025 LAGUNA WAY
NAPLES, FL 34109

New Mailing Address:

FEI Number: 59-3652807

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONROY, J. THOMAS III
MORRISON & CONROY, P.A.
3838 TAMiami TRAIL NORTH, STE. 402
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

CONROY, J. THOMAS III
2640 GOLDEN GATE PKWY, SUITE 115
NAPLES, FL 34105 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:

01/19/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ZMENAK, EMIL
Address: 87 LAKE ST.,
City-St-Zip: GRIMSBY, ONTARIO, L3M 2G6, CA

Title: D () Delete
Name: MOLA, DAVID
Address: 2025 LAGUNA WAY
City-St-Zip: NAPLES, FL 34109

Title: D (X) Delete
Name: CONROY, J. THOMAS III
Address: 3838 TAMiami TRAIL N., STE. 402
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: CONROY, J. THOMAS III
Address: 2640 GOLDEN GATE PKWY, SUITE 115
City-St-Zip: NAPLES, FL 34105

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: DAVID J. MOLA

D

01/19/2005

Electronic Signature of Signing Officer or Director

Date