## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000098576

Entity Name: MERRICK PARK APARTMENTS, INC.

FILED Apr 25, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
1801 HERMITAGE BLVD STE 600 TALLAHASSEE, FL 32308				1801 HERMITAGE BLVD SUITE 100 TALLAHASSEE, FL 32308		
Current Mailing Address:				New Mailing Address:		
1801 HERMITAGE BLVD STE 100 TALLAHASSEE, FL 32308			1801 HERMITAGE BLVD SUITE 100 TALLAHASSEE, FL 32308			
FEI Number: 74-3126876 FEI Number Applied For ( ) FEI Num			nber Not Applicable ( ) Certificate of Status Desired ( )			
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
C T CORPORATION SYSTEMS 1200 SOUTH PINE ISLAND RD PLANTATION, FL 33324 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:						
Electronic Signature of Registered Agent						Date
Election Campaign Financing Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	BENNETT, DOUG	E BOULEVARD, SUITE 100		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	SMITH, JEFFRE	E BOULEVARD, SUITE 100		Title: Name: Address: City-St-Zip:	SMITH, JEFF 1801 HERMI	(X) Change()Addition FREY L ITAGE BOULEVARD, SUITE 100 EE, FL 32308
Title: Name: Address: City-St-Zip:	GRAY, LYNNE M	E BOULEVARD, SUITE 100		Title: Name: Address: City-St-Zip:	GRAY, LYNN 1801 HERMI	(X) Change()Addition NE M ITAGE BOULEVARD, SUITE 100 EE, FL 32308
Title: Name: Address: City-St-Zip:	P () I TOGNARELLI, M 191 NORTH WAG CHICAGO, IL 60	AURY R CKER DRIVE, SUITE 2500		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	MCCARTHY, THO	CKER DRIVE, SUITE 2500		Title: Name: Address: City-St-Zip:	MCCARTHY,	WACKER DRIVE, SUITE 2500
Title: Name: Address: City-St-Zip:	SMITH, ROGER	CKER DRIVE, SUITE 2500		Title: Name: Address: City-St-Zip:	VT SMITH, ROG 191 NORTH CHICAGO, II	WACKER DRIVE, SUITE 2500

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROGER E. SMITH VT 04/25/2007