

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000067146

FILED
Apr 18, 2006
Secretary of State

Entity Name: UNIVERSITY PARK RESALE CORPORATION

Current Principal Place of Business:

9 HERON OAKS PLACE
AMELIA ISLAND, FL 32034 US

New Principal Place of Business:

2209 BOXWOOD LANE
AMELIA ISLAND, FL 32034 US

Current Mailing Address:

% MARTYN REECE
9 HERON OAKS PLACE
AMELIA ISLAND, FL 32034 US

New Mailing Address:

% MARTYN REECE
2209 BOXWOOD LANE
AMELIA ISLAND, FL 32034 US

FEI Number: 65-0624220

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REECE, MARTYN
9 HERON OAKS PLACE
AMELIA ISLAND, FL 32034 US

Name and Address of New Registered Agent:

REECE, MARTYN
2209 BOXWOOD LANE
AMELIA ISLAND, FL 32034 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:

04/18/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: REECE, MARTYN
Address: 9 HERON OAKS PLACE
City-St-Zip: AMELIA ISLAND, FL 32034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: REECE, MARTYN
Address: 2209 BOXWOOD LANE
City-St-Zip: AMELIA ISLAND, FL 32034

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARTYN REECE

P

04/18/2006

Electronic Signature of Signing Officer or Director

Date