2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000101092

Entity Name: CLASSIC PROPERTIES OF NORTH FLORIDA, INC.

FILED Jan 05, 2006 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

4018 NW 22ND DRIVE 3921 NW 97TH BLVD GAINESVILLE, FL 32605 GAINESVILLE, FL 32606

Current Mailing Address: New Mailing Address:

4018 NW 22ND DRIVE 3921 NW 97TH BLVD GAINESVILLE, FL 32605 GAINESVILLE, FL 32606

FEI Number: 65-0880948 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

QUINONES, MIGUEL
4018 NW 22ND DRIVE
GAINESVILLE, FL 32605 US
QUINONES, MIGUEL
3921 NW 97TH BLVD
GAINESVILLE, FL 32606 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: 01/05/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

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

 Name:
 QUINONES, MQUEL
 Name:
 QUINONES, MQUEL

 Address:
 4018 NW 22ND DRIVE
 Address:
 3921 NW 97TH BLVD

 City-St-Zip:
 GAINESVILLE, FL 32605
 City-St-Zip:
 GAINESVILLE, FL 32606

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

 Name:
 QUINONES, CAROLYN S
 Name:
 QUINONES, CAROLYN S

 Address:
 4018 NW 22ND DRIVE
 Address:
 3921 NW 97TH BLVD

 City-St-Zip:
 GAINESVILLE, FL 32605
 City-St-Zip:
 GAINESVILLE, FL 32606

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: CAROLYN S. QUINONES VP 01/05/2006