

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 01, 2004  
Secretary of State**

DOCUMENT# N93000004586

Entity Name: I-75 AND ARCHER ROAD, N. W. QUADRANT OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O ACTION REALTY  
6110-B NW 1ST PLACE  
GAINESVILLE, FL 32607

**New Principal Place of Business:**

C/O ACTION REAL ESTATE SERVICES  
6110-B NW 1ST PLACE  
GAINESVILLE, FL 32607

**Current Mailing Address:**

C/O ACTION REALTY  
6110-B NW 1ST PLACE  
GAINESVILLE, FL 32607

**New Mailing Address:**

C/O ACTION REAL ESTATE SERVICES  
6110-B NW 1ST PLACE  
GAINESVILLE, FL 32607

FEI Number: 59-3241007      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

TENAGLIA, RIK  
C/O ACTION REALTY  
6110-B NW 1ST PLACE  
GAINESVILLE, FL 32607 US

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

SAUSAMAN, JEFFREY  
C/O ACTION REAL ESTATE SERVICES  
6110-B NW 1ST PLACE  
GAINESVILLE, FL 32607 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: D. JEFFREY SAUSAMAN      04/01/2004  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: PST      ( ) Delete  
Name: DELANEY, BRUCE D  
Address: 2012 W. UNIVERSITY AVENUE  
City-St-Zip: GAINESVILLE, FL 32603

Title: D      ( ) Delete  
Name: SCHENK, BRIAN  
Address: P.O. BOX 23180 LIL CHAMP FOOD STORES  
City-St-Zip: JACKSONVILLE, FL 32241

Title: D      ( ) Delete  
Name: MAUSAR, FRED  
Address: 4001 SW 43RD ST CRACKER BARREL  
City-St-Zip: GAINESVILLE, FL 32608

Title: D      ( ) Delete  
Name: MCMILLIN, DONALD  
Address: 402 LANSBROOK DR  
City-St-Zip: VENICE, FL 34292

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

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

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

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: BRUCE DELANEY      P      04/01/2004  
Electronic Signature of Signing Officer or Director      Date