2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2009
Secretary of State

DOCUMENT# 760111

Entity Name: THE PROFESSIONAL CENTER OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2115 PALM BAY RD., NE, SUITE 4E
PALM BAY, FL 32905 US

New Principal Place of Business:

2115 PALM BAY ROAD NE
4E
PALM BAY, FL 32905 US

Current Mailing Address:

2115 PALM BAY RD., NE, SUITE 4E
PALM BAY, FL 32905 US

New Mailing Address:

2115 PALM BAY ROAD NE
4E
PALM BAY, FL 32905 US

FEI Number: 59-2176671 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MORRIS, JAMES T
2115 PALM BAY RD., NE, SUITE 4E
PALM BAY, FL 32905 US

Name and Address of New Registered Agent:

MORRIS, JAMES T
2115 PALM BAY ROAD NE
4E
PALM BAY, FL 32905 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: 01/14/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MORRIS, JAMES T
Address: 2115 PALM BAY ROAD, NE, SUITE 4E
City-St-Zip: PALM BAY, FL 32905 US

Title: VPD (X) Delete
Name: PAGLIARULO, MARK
Address: 2115 PALM BAY ROAD, NE, SUITE 7E
City-St-Zip: PALM BAY, FL 32905 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MORRIS, JAMES T
Address: 2115 PALM BAY ROAD NE, SUITE 4E
City-St-Zip: PALM BAY, FL 32905 US

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

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

SIGNATURE: JAMES T. MORRIS DIR 01/14/2009
Electronic Signature of Signing Officer or Director — Date