

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009391

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: SUNTREE PROFESSIONAL PARK ASSOCIATION, INC.

**Current Principal Place of Business:**

3188 SUNTREE BLVD.  
ROCKLEDGE, FL 32955

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 410457  
MELBOURNE, FL 32941

**New Mailing Address:**

FEI Number: 26-1211157

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FOLENO, GARY J  
1300 BEDFORD DRIVE SUITE 101  
MELBOURNE, FL 32940 US

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

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

**OFFICERS AND DIRECTORS:**

Title: DPT ( ) Delete  
Name: FOLENO, GARY J  
Address: 1300 BEDFORD DRIVE SUITE 101  
City-St-Zip: MELBOURNE, FL 32940

Title: DVPS ( ) Delete  
Name: FOLENO, RONALD  
Address: 1300 BEDFORD DRIVE SUITE 101  
City-St-Zip: MELBOURNE, FL 32940

Title: D ( ) Delete  
Name: MOMMERS, PIERRE  
Address: 2351 W EAU GALLIE BLVD SUITE 1  
City-St-Zip: MELBOURNE, FL 32935

**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:

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: RONALD J. FOLENO

VP

04/30/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date