2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46950

Apr 29, 2009 Secretary of State

Entity Name: PARK OF COMMERCE ASSOCIATION, INC.

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

4700 MILLENIA BOULEVARD SUITE 380 ORLANDO, FL 32839

New Mailing Address: Current Mailing Address:

600 E, 96TH STREET SUITE 100 600 E, 96TH STREET SUITE 100 DIANE DEAKIN - LEGAL DEPARTMENT ATTN: LEGAL DEPARTMENT INDIANAPOLIS, IN 46240 INDIANAPOLIS, IN 46240

FEI Number: 65-0417286 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:

CT CORPORATION SYSTEM 1200 S PINE ISLAND RD PLANTATION, FL 33324 US

OFFICERS AND DIRECTORS:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

SEGER, CHRIS Name: CIPRIANI, SCOTT Name:

4700 MILLENIA BOULEVARD, SUITE 380 Address: 4700 MILLENIA BOULEVARD, SUITE 380 Address: ORLANDO, FL 32839 ORLANDO, FL 32839

City-St-Zip: City-St-Zip:

Title: VD () Delete Title: (X) Change () Addition POTTINGER, JOHN Name: IRMSCHER, DOUGLAS Name:

Address: 4700 MILLENIA BOULEVARD, SUITE 380 Address: 4700 MILLENIA BOULEVARD, SUITE 380

ORLANDO, FL 32839

City-St-Zip: ORLANDO, FL 32839 City-St-Zip:

Title: () Delete Title: SEC (X) Change () Addition GASKIN, JOHN R PARKER, TAMMI D Name: Name:

3950 SHACKLEFORD BLVD., SUITE 300 3950 SHACKLEFORD BLVD., SUITE 300 Address: Address:

City-St-Zip: DULUTH, GA 30096 City-St-Zip: DULUTH, GA 30096

Title: () Delete Title: TREA () Change (X) Addition Name: Name: SWEARINGEN, TRACY D Address: Address: 600 E. 96TH STREET, SUITE 100 City-St-Zip: City-St-Zip: INDIANAPOLIS, IN 46240

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: TAMMI D. PARKER SEC 04/29/2009