

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005433

FILED
Feb 03, 2009
Secretary of State

Entity Name: OSPREY COVE PROFESSIONAL OFFICE PARK ASSOCIATION, INC.

Current Principal Place of Business:

912 E. FLETCHER AVENUE
TAMPA, FL 33612

New Principal Place of Business:

21748 SR 54
LUTZ, FL 33548

Current Mailing Address:

912 E. FLETCHER AVENUE
TAMPA, FL 33612

New Mailing Address:

P.O. BOX 731
LUTZ, FL 33548

FEI Number: 55-0907497

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATHEW, THOMAS M
912 E. FLETCHER AVENUE
TAMPA, FL 33612 US

Name and Address of New Registered Agent:

PITTS, DANIEL L
19411 GOLDEN SLIPPER PLACE
LUTZ, FL 33558 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: DANIEL L. PITTS

02/03/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MATHEW, THOMAS M
Address: 912 E. FLETCHER AVENUE
City-St-Zip: TAMPA, FL 33612

Title: PSTD () Delete
Name: PITTS, DANIEL L
Address: 19411 GOLDEN SLIPPER PLACE
City-St-Zip: LUTZ, FL 33558

Title: D () Delete
Name: NELSON, ROBERT D
Address: 19113 CROOKED LANE
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: COMPANIONI, GEORGE R
Address: 13701 BRUCE B. DOWNS BLVD
City-St-Zip: TAMPA, FL 33612

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: DANIEL L. PITTS

D

02/03/2009

Electronic Signature of Signing Officer or Director

Date