

2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000008909

FILED
Apr 27, 2010
Secretary of State

Entity Name: THE MAHAN PROFESSIONAL CENTER PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1618 MAHAN CENTER BLVD
SUITE 103
TALLAHASSEE, FL 32308

New Principal Place of Business:

1334 TIMBERLANE ROAD
SUITE 6
TALLAHASSEE, FL 32312

Current Mailing Address:

1618 MAHAN CENTER BLVD
SUITE 103
TALLAHASSEE, FL 32308

New Mailing Address:

PO BOX 12368
TALLAHASSEE, FL 32317

FEI Number: 20-5020092

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALMER, WALDO H
1618 MAHAN CENTER BLVD
SUITE 103
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

KEENA, CHRIS M
1334 TIMBERLANE ROAD
SUITE 6
TALLAHASSEE, FL 32312 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: CHRIS M. KEENA

04/27/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: BALDOCK, WILLIAM DR
Address: 2621 MITCHAM DRIVE SUITE 101
City-St-Zip: TALLAHASSEE, FL 32308

Title: VP
Name: HARPER, LARRY DR
Address: 2452 MAHAN DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

Title: T
Name: BALDOCK, RHONDA
Address: 2621 MITCHAM DRIVE SUITE 101
City-St-Zip: TALLAHASSEE, FL 32308

Title: S
Name: HILAMAN, LINDA
Address: 1614 MAHAN CENTER DRIVE SUITE 101
City-St-Zip: TALLAHASSEE, FL 32308

Title: D
Name: MCBROOM, JOHN DR
Address: 2617 MITCHAM DRIVE SUITE 101
City-St-Zip: TALLAHASSEE, FL 32308

Title: D
Name: GOLDEN, JACK DR
Address: 1618 MAHAN CENTER DRIVE SUITE 101
City-St-Zip: TALLAHASSEE, FL 32308

I hereby 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 all other like empowered.

SIGNATURE: CHRIS M. KEENA

RA

04/27/2010

Electronic Signature of Signing Officer or Director

Date