Entity Name	: NORTHAMPTON OFFICE PARK OWNERS	ASSOCIATIO	N, INC.	Secretary of State
Current Prin 1708 CORDEL TALLAHASSER				0591251791CC
Current Ma	iling Address:			
P.O. BOX 36 TALLAHASS	621 SEE, FL 32315 US			
FEI Number: 59-3073474 Certificate			Certificate of S	tatus Desired: No
Name and A	Address of Current Registered Agent:			
1708 CORDEL	MANAGEMENT SUPPORT AND SERVICES L DRIVE E, FL 32303 US			
The above name	d entity submits this statement for the purpose of changing its regi	stered office or regis	tered agent, or both, in	the State of Florida.
	d entity submits this statement for the purpose of changing its regi E: MELISA C. SMITH	stered office or regis	tered agent, or both, in	the State of Florida. 04/05/2022
		stered office or regis	tered agent, or both, in	
SIGNATURI	E: MELISA C. SMITH	stered office or regis	tered agent, or both, in	04/05/2022
SIGNATURI	E: MELISA C. SMITH Electronic Signature of Registered Agent	stered office or regis	tered agent, or both, in	04/05/2022
SIGNATURI Officer/Dire	E: MELISA C. SMITH Electronic Signature of Registered Agent ctor Detail :			04/05/2022
SIGNATURI Officer/Dire	E: MELISA C. SMITH Electronic Signature of Registered Agent Ctor Detail : PRESIDENT	Title	VP	04/05/2022
SIGNATURI Officer/Dire Title Name	E: MELISA C. SMITH Electronic Signature of Registered Agent Ctor Detail : PRESIDENT ANDERSON, PAUL PO BOX 3621	Title Name	VP WILCOX, SCOTT PO BOX 3621	04/05/2022 Date
SIGNATURI Officer/Dire Title Name Address	E: MELISA C. SMITH Electronic Signature of Registered Agent Ctor Detail : PRESIDENT ANDERSON, PAUL PO BOX 3621	Title Name Address	VP WILCOX, SCOTT PO BOX 3621	04/05/2022 Date
SIGNATURI Officer/Dire Title Name Address City-State-Zip:	E: MELISA C. SMITH Electronic Signature of Registered Agent Ctor Detail : PRESIDENT ANDERSON, PAUL PO BOX 3621 TALLAHASSEE FL 32315	Title Name Address	VP WILCOX, SCOTT PO BOX 3621	04/05/2022 Date
SIGNATURI Officer/Dire Title Name Address City-State-Zip: Title	E: MELISA C. SMITH Electronic Signature of Registered Agent Ctor Detail : PRESIDENT ANDERSON, PAUL PO BOX 3621 TALLAHASSEE FL 32315 SECRETARY, TREASURER	Title Name Address	VP WILCOX, SCOTT PO BOX 3621	04/05/2022 Date

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44187

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: PAUL ANDERSON

PRESIDENT

04/05/2022

FILED Apr 05, 2022

Electronic Signature of Signing Officer/Director Detail