Entity Name: EGMONT PROFESSIONAL PARK OWNERS ASSOCIATION, IN	C. Secretary of State
Current Principal Place of Business: 91026 TEAL COURT FERNANDINA BEACH, FL 32034	CC7552873444
Current Mailing Address:	
91026 TEAL COURT FERNANDINA BEACH, FL 32034 US	
FEI Number: 59-3661444 Certit	ficate of Status Desired: No
Name and Address of Current Registered Agent:	
OWENS, SHIRLEY SEC 91026 TEAL COURT	
FERNANDINA BEACH, FL 32034 US	
FERNANDINA BEACH, FL 32034 US The above named entity submits this statement for the purpose of changing its registered office or registered age	ent, or both, in the State of Florida.
	ent, or both, in the State of Florida.
The above named entity submits this statement for the purpose of changing its registered office or registered age	ent, or both, in the State of Florida. Date
The above named entity submits this statement for the purpose of changing its registered office or registered age SIGNATURE:	
The above named entity submits this statement for the purpose of changing its registered office or registered age SIGNATURE: Electronic Signature of Registered Agent	
The above named entity submits this statement for the purpose of changing its registered office or registered ages SIGNATURE: Electronic Signature of Registered Agent Officer/Director Detail : Title DIR Title SEC	
The above named entity submits this statement for the purpose of changing its registered office or registered age         SIGNATURE:         Electronic Signature of Registered Agent         Officer/Director Detail :         Title       DIR         Mame       OWENS, C K	Date
The above named entity submits this statement for the purpose of changing its registered office or registered age         SIGNATURE:         Electronic Signature of Registered Agent         Officer/Director Detail :         Title       DIR         Name       OWENS, C K         Name       OWENS         Address       91026 TEAL COURT	Date NS, SHIRLEY
The above named entity submits this statement for the purpose of changing its registered office or registered age         SIGNATURE:         Electronic Signature of Registered Agent         Officer/Director Detail :         Title       DIR         Name       OWENS, C K         Name       OWENS         Address       91026 TEAL COURT	Date NS, SHIRLEY TEAL COURT
The above named entity submits this statement for the purpose of changing its registered office or registered age         SIGNATURE:         Electronic Signature of Registered Agent         Officer/Director Detail :         Title       DIR         Name       OWENS, C K         Address       91026 TEAL COURT         Address       91026 TEAL COURT         City-State-Zip:       FERNANDINA BEACH FL 32034	Date NS, SHIRLEY TEAL COURT

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9900006602

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.

SECRETARY

SIGNATURE: GEORGE G MILLS

City-State-Zip: FERNANDINA BEACH FL 32034

Electronic Signature of Signing Officer/Director Detail

02/26/2016

FILED Feb 26, 2016