

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 479329

FILED  
Jan 18, 2008  
Secretary of State

Entity Name: NORTHWOOD COMMERCIAL PARK OWNERS ASSOCIATION, INC.

## Current Principal Place of Business:

4400 NW 36 ST.  
GAINESVILLE, FL 32606 US

## New Principal Place of Business:

5208 SW 91ST DRIVE  
SUITE D  
GAINESVILLE, FL 32608 US

## Current Mailing Address:

4400 NW 36 ST.  
GAINESVILLE, FL 32606 US

## New Mailing Address:

5208 SW 91ST DRIVE  
SUITE D  
GAINESVILLE, FL 32608 US

FEI Number: 59-1625310

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TRIPPE, PAT  
4400 NW 36TH AVE  
GAINESVILLE, FL 32606 US

## Name and Address of New Registered Agent:

TRIPPE, PAT  
5208 SW 91ST DRIVE  
SUITE D  
GAINESVILLE, FL 32608 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:

01/18/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MCGEOWN, FRANK  
Address: 2317 NW 122ND ST  
City-St-Zip: GAINESVILLE, FL 32653

Title: V ( ) Delete  
Name: LOWRY, DEAN  
Address: 2341 NW 66 CT  
City-St-Zip: GAINESVILLE, FL 32653

Title: D ( ) Delete  
Name: WILCOX, DOUGLAS W II  
Address: 2501 NW 66TH CT  
City-St-Zip: GAINESVILLE, FL 32653

Title: D ( ) Delete  
Name: HILL, GINA  
Address: 2217 NW 66TH CT  
City-St-Zip: GAINESVILLE, FL 32653

Title: C ( ) Delete  
Name: CREEL, KEN  
Address: 2317 NW 66TH CT  
City-St-Zip: GAINESVILLE, FL 32653

Title: T ( ) Delete  
Name: PETTY, BETTY  
Address: 2320 NW 66TH COURT  
City-St-Zip: GAINESVILLE, FL 32653

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRANK MCGEOWN

P

01/18/2008

Electronic Signature of Signing Officer or Director

Date