2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734828

FILED Jan 07, 2009 Secretary of State

Entity Name: THE OFFICE PAVILION ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 2301 PARK AVE, STE 208 2301 PARK AVENUE ORANGE PARK, FL 32073 SUITE 208 ORANGE PARK, FL 32073 **Current Mailing Address:** New Mailing Address: 2301 PARK AVE, STE 208 2301 PARK AVENUE ORANGE PARK, FL 32073 US SUITE 208 ORANGE PARK, FL 32073 US FEI Number: 59-1763040 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FULLER, BARRY FULLER, BARRY 2301 PARK AVE 2301 PARK AVE ORANGE PARK, FL 32073 US SUITE 404 ORANGE PARK, FL 32073 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: 01/07/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition KELLER, DWIGHT Name: Name: 2301 PARK AVE, STE 201 Address: Address: City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: Title: () Delete Title: (X) Change () Addition JOHNSON, STEVE Name: JOHNSON, STEVE Name: Address: 2301 PARK AVE Address: 2301 PARK AVE. STE 208 City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: ORANGE PARK, FL 32073 Title: () Delete Title: () Change () Addition HARTWIG, KELLEY Name: Name: 2301 PARK AVE STE 300 Address: Address: City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: (X) Change () Addition Title: () Delete Title: RAYNER, CLIVE Name: Name: RAYNER, CLIVE Address: 2301 PARK AVE Address: 2301 PARK AVE, STE 101 City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: ORANGE PARK, FL 32073 Title: () Delete Title: (X) Change () Addition PALMER, BARBARA PALMER, BARBARA Name: Name: 2301 PARK AVE 2301 PARK AVE. STE 402 Address: Address: City-St-Zip: ORANGE PARK, FL 32073 City-St-Zip: ORANGE PARK, FL 32073

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: STEPHEN W. JOHNSON D 01/07/2009