2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2008
Secretary of State

DOCUMENT# 755704

Entity Name: PROCTOR PLAZA ASSOCIATION, INC.

Current Principal Place of Business:

7707 NORTH US NO. 1
SUITE #10
VERO BEACH, FL 32967

New Principal Place of Business:

Current Mailing Address:

7707 NORTH US NO. 1
SUITE #10
VERO BEACH, FL 32967

New Mailing Address:

FEI Number: 59-2264093 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WELTON, JOHN C
7707 US 1
STE. 10
VERO BEACH, FL 32967 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: STOCKER, GEORGE
Address: 9535 FRANGIPANI DR
City-St-Zip: VERO BEACH, FL 32963

Title: DVPT ( ) Delete
Name: MITCHELL, JOHN W
Address: 220 SANDPIPER PT
City-St-Zip: VERO BEACH, FL 32963

Title: D ( ) Delete
Name: EDWARDS, DAVID
Address: 350 SABAL PALM LN
City-St-Zip: VERO BEACH, FL 32963

Title: D ( ) Delete
Name: SMITHERS, KIP
Address: 7707 N. US 1, STE 6
City-St-Zip: VERO BEACH, FL 32967

Title: P ( ) Delete
Name: WELTON, JOHN C
Address: 7707 N. US 1, SUITE 10
City-St-Zip: VERO BEACH, FL 32967

Title: SD ( ) Delete
Name: ROBERTS, SUE BISSELL
Address: 7707 N. US 1, #1
City-St-Zip: VERO BEACH, FL 32967

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

SIGNATURE: JOHN C. WELTON P 04/29/2008

Electronic Signature of Signing Officer or Director — Date