2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000001229

FILED Apr 16, 2009 Secretary of State

Entity Name: ANCLOTE INDUSTRIAL PARK PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

SOUTHERN ENGINEERING & AUTOMOTION

1827 INDUSTRIAL BLVD

TARPON SPRINGS, FL 34688

BAR G ENTERPRISES, INC.
707 WESLEY AVE
TARPON SPRINGS, FL 34688

Current Mailing Address: New Mailing Address:

SOUTHERN ENGINEERING & AUTOMOTION

1827 INDUSTRIAL BLVD

TARPON SPRINGS, FL 34688

BAR G ENTERPRISES, INC.
PO BOX 430
TARPON SPRINGS, FL 34689

FEI Number: 59-3739664 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:

MAC GREGOR, D. TRAVIS

1827 INDUSTRIAL BLVD

TARPON SPRINGS, FL 34689

US

WHYTE, JOSEPH
707 WESLEY AVE
TARPON SPRINGS, FL 34688

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: JOSEPH WHYTE 04/16/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: PD () Delete Title: () Change () Addition

 Name:
 BASH, EDWARD
 Name:

 Address:
 P.O. BOX 430
 Address:

 City-St-Zip:
 TARPON SPRINGS, FL 34689
 City-St-Zip:

Title: VPD () Delete Title: VPD (X) Change () Addition

 Name:
 MAC GREGOR, D. TRAVIS
 Name:
 WHYTE, JOSEPH

 Address:
 1827 INDUSTRIAL BLVD
 Address:
 707 WESLEY AVE

 City-St-Zip:
 TARPON SPRINGS, FL 34689
 City-St-Zip:
 TARPON SPRINGS, FL 34688

Title: SDT () Delete Title: SDT (X) Change () Addition

 Name:
 MAC GREGOR, JILL N
 Name:
 KMIEC, KRISTINA

 Address:
 1827 INDUSTRIAL BLVD
 Address:
 707 WESLEY AVE

City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: TARPON SPRINGS, FL 34688

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: KRISTINA KMIEC SDT 04/16/2009