

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000003132

FILED
Mar 08, 2006
Secretary of State

Entity Name: WINDSOR PARKE PROFESSIONAL CENTRE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

13500 SUTTON PARK DRIVE SOUTH
SUITE 404
JACKSONVILLE, FL 32224 US

New Principal Place of Business:

Current Mailing Address:

13500 SUTTON PARK DRIVE SOUTH
SUITE 404
JACKSONVILLE, FL 32224 US

New Mailing Address:

FEI Number: 41-2038228

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOOKHOLT, CONNIE S
13500 SULTAN PARK DRIVE SOUTH
SUITE 404
JACKSONVILLE, FL 32224 US

Name and Address of New Registered Agent:

BOOKHOLT, CONNIE S
13500 SUTTON PARK DRIVE SOUTH
SUITE 404
JACKSONVILLE, FL 32224 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: CONNIE BOOKHOLT

03/08/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BRACKETT, CHARLES T
Address: 13500 SUTTON PARK DRIVE SOUTH #1503
City-St-Zip: JACKSONVILLE, FL 32224

Title: DV () Delete
Name: MOORE, JAMES
Address: 13500 SUTTON PARK DR., SO.,# 101
City-St-Zip: JACKSONVILLE, FL 32224

Title: DST () Delete
Name: BOOKHOLT, CONNIE S
Address: 13500 SUTTON PARK DRIVE SOUTH #404
City-St-Zip: JACKSONVILLE, FL 32224

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: CONNIE BOOKHOLT

SEC

03/08/2006

Electronic Signature of Signing Officer or Director

Date