2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N02000000040

TI FILED
Sep 26, 2008
Secretary of State

Entity Name: EAU GALLIE MOSSWOOD PROFESSIONAL PARK OWNERS ASSOCIATION, INC.

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

2287 W EAU GALLIE BLVD, 1290 W. EAU GALLIE BLVD SUITE A MELBOURNE, FL 32935

MELBOURNE, FL 32935

Current Mailing Address: New Mailing Address:

2287 W EAU GALLIE BLVD, 1290 W. EAU GALLIE BLVD SUITE A MELBOURNE, FL 32935 MELBOURNE, FL 32935

FEI Number: 27-0003279 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:

FRESE, GARY B
930 S HARBOR CITY BLVD STE 505
MELBOURNE, FL 32901 US
KINBERG, EDWARD J PRES.
1290 W. EAU GALLIE BLVD.
MELBOURNE, FL 32935 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: EDWARD J. KINBERG 09/26/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVT () Delete Title: PRES (X) Change () Addition

Name:MOYLES, BRIANT GName:KINBERG, EDWARD JAddress:2287 W EAU GALLIE BLVD, STE AAddress:1290 W. EAU GALLIE BLVD.

City-St-Zip: MELBOURNE, FL 32935 City-St-Zip: MELBOURNE, FL 32935

Title: DPS () Delete Title: VP (X) Change () Addition Name: WILLIAMS, MICHAEL H Name: SHEIN, DAVID

Address: 2287 W EAU GALLIE BLVD, STE A Address: 1300 W. EAU GALLIE BLVD.
City-St-Zip: MELBOURNE, FL 32935 City-St-Zip: MELBOURNE, FL 32935

Title: D () Delete Title: SEC (X) Change () Addition Name: WILLIAMS, THERESA T Name: WILLIAMS, MIKE

Name: WILLIAMS, THERESA T Name: WILLIAMS, MIKE
Address: 2287 W EAU GALLIE BLVD, STE A Address: 2287 W EAU GALLIE BLVD. , SUITE A

City-St-Zip: MELBOURNE, FL 32935 City-St-Zip: MELBOURNE, FL 32935

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: EDWARD J. KINBERG PRES 09/26/2008