2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004062

FILED Apr 24, 2009 Secretary of State

Entity Name: UNIVERISTY GROVE OFFICE PARK OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
2870 SHEF SUITE 100 SAINT PE		L 33716			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
2870 SHER SUITE 100 SAINT PE		L 33716			
FEI Number:	03-0449589	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
1968 BAYS DUNEDIN,		JS	urpose of changing its registe	red office or registered agent, or both,	
	of Florida.	abilitio tillo otatellielle for tillo pe	arpose of changing its registe	red embe of registered agent, or betti,	
SIGNATUF	RE:				
	Electroni	ic Signature of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	${\bf ADDITIONS/CHANGES\ TO\ OFFICERS\ AND\ DIRECTORS:}$	
Title: Name: Address: City-St-Zip:	P () SHAW, SCOTT 13337 N 56TH S TAMPA, FL 336		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () BEYER, PAUL 13349 N 56TH S TAMPA, FL 336		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD () KLERSY, LINDA 13325 N 56TH S TAMPA, FL 336	ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () VASQUEZ, EDU 13343 NORTH 5 TAMPA, FL 336	6TH ST	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: TODD R. PALMER MGR 04/24/2009