

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005813

FILED
Mar 23, 2007
Secretary of State

Entity Name: CITY CENTER CORPORATE PARK PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1000 CITY CENTER CIRCLE
PORT ORANGE, FL 32129 US

New Principal Place of Business:

Current Mailing Address:

1000 CITY CENTER CIRCLE
ATTENTION: CITY MANAGER
PORT ORANGE, FL 32129 US

New Mailing Address:

FEI Number: 57-1164161

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARKER, KENNETH W
1000 CITY CENTER CIRCLE
FINANCE DEPARTMENT
PORT ORANGE, FL 32129 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: DP () Delete
Name: GREEN, ALLEN
Address: 1000 CITY CENTER CIRCLE
City-St-Zip: PORT ORANGE, FL 32129 US

Title: DVP () Delete
Name: STEINDOERFER, GEORGE
Address: 1000 CITY CENTER CIRCLE
City-St-Zip: PORT ORANGE, FL 32129 US

Title: D () Delete
Name: POHLMANN, BOB
Address: 1000 CITY CENTER CIRCLE
City-St-Zip: PORT ORANGE, FL 32129 US

Title: D () Delete
Name: KENNEDY, DENNIS
Address: 1000 CITY CENTER CIRCLE
City-St-Zip: PORT ORANGE, FL 32129 US

Title: DS () Delete
Name: MARTIN, MARY
Address: 1000 CITY CENTER CIRCLE
City-St-Zip: PORT ORANGE, FL 32129 US

Title: T () Delete
Name: MARTIN, MARY
Address: 1000 CITY CENTER CIRCLE
City-St-Zip: PORT ORANGE, FL 32129 US

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
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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: ALLEN GREEN

DP

03/23/2007

Electronic Signature of Signing Officer or Director

Date