

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Mar 12, 2010
Secretary of State

DOCUMENT# N02000008699

Entity Name: ARBOR RIDGE PROFESSIONAL PARK OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**16630 NORTH DALE MABRY HWY
TAMPA, FL 336181400 US**New Principal Place of Business:**16630 NORTH DALE MABRY HWY
TAMPA, FL 336181400**Current Mailing Address:**16630 NORTH DALE MABRY HWY
TAMPA, FL 336181400 US**New Mailing Address:**16630 NORTH DALE MABRY HWY
TAMPA, FL 336181400**FEI Number:** 65-1161582**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WESTFALL, JOHN
16630 N. DALE MABRY HIGHWAY
TAMPA, FL 336181400 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: VD
Name: REDMON, KATHLEEN
Address: 707 W FLETCHER
City-St-Zip: TAMPA, FL 33612

Title: STD
Name: COULTER, ERIC
Address: 14422- 24 BRUCE B DOWNS BLVD
City-St-Zip: TAMPA, FL 33613

Title: PD
Name: FLANAGAN, JOHN
Address: 14442 BRUCE B. DOWNS
City-St-Zip: TAMPA, FL 336132612

I hereby 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 all other like empowered.

SIGNATURE: KATHLEEN REDMON

VD

03/12/2010

Electronic Signature of Signing Officer or Director

Date