

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009689

FILED  
Mar 19, 2010  
Secretary of State

Entity Name: THIRTY-NINTH AVENUE OFFICE OWNERS ASSN., INC.

**Current Principal Place of Business:**

500 NW 43RD STREET  
SUITE 3  
GAINESVILLE, FL 32607

**New Principal Place of Business:**

**Current Mailing Address:**

500 NW 43RD STREET  
SUITE 3  
GAINESVILLE, FL 32607

**New Mailing Address:**

FEI Number: 74-3088206      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORNERSTONE PROP. SOL. OF N. CENT. FL.  
500 NW 43RD STREET  
SUITE 3  
GAINESVILLE, FL 32607 US

**Name and Address of New Registered Agent:**

HAUFLER, EUGENE C RA  
500 NW 43RD STREET  
SUITE 3  
GAINESVILLE, FL 32607 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: EUGENE C. HAUFLER      03/19/2010  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: S  
Name: DERUS, RHONDA  
Address: 4421 NW 39TH AVE BLG 2 STE 1  
City-St-Zip: GAINESVILLE, FL 32606

Title: T  
Name: CORNWELL, DAVID  
Address: 4421 NW 39TH AVE, BLDG 3  
City-St-Zip: GAINESVILLE, FL 32606

Title: P  
Name: JOHNSON, CARL  
Address: 4421 NW 39TH AVE., BLDG 1, STE 2  
City-St-Zip: GAINESVILLE, FL 32606

Title: VP  
Name: FOX, MONICA  
Address: 4421 NW 39 AVE., BLDG 1, STE 1  
City-St-Zip: GAINESVILLE, FL 32606

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: CARL JOHNSON      P      03/19/2010  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date