2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2009
Secretary of State

DOCUMENT# N03000000540

Entity Name: HARBOR PROFESSIONAL CENTRE MASTER ASSOCIATION, INC.

Current Principal Place of Business:

3420 TAMIAMI TRAIL
SUITE 3
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

Current Mailing Address:

3420 TAMIAMI TRAIL
SUITE 3
PORT CHARLOTTE, FL 33952

New Mailing Address:

FEI Number: 13-4257930 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NASIR, KHALIDI
3420 TAMIAMI TRAIL
SUITE 3
PORT CHARLOTTE, FL 33952 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: D ( ) Delete
Name: KHALIDI, NASIR MD
Address: 3420 TAMIAMI TRAIL
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D ( ) Delete
Name: ZUSMAN, AMY
Address: 3430 TAMIAMI TRL STE A
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D ( ) Delete
Name: VAKIL, SAMIR DPM
Address: 3406 TAMIAMI TRL STE 1
City-St-Zip: PORT CHARLOTTE, FL 33952

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:

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: NASIR KHALIDI PD 01/14/2009

Electronic Signature of Signing Officer or Director — Date