## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # N03000006506

1. Entity Name



FILED
Apr 20, 2006 8:00 am
Secretary of State
J =

04-20-2006 90178 022 \*\*\*\*61.25

	ON PROFESSIONAL PARK TION, INC.	OWNERS			
Principal Plac 16630 N. DA TAMPA, FL 3	ILE MABRY HWY	Mailing Address 16630 N. DALE MABRY TAMPA, FL 33618	HWY		
				LABOURDE ETE BOUED ETHE DERN BRUH BRUH BRUH BRUH BRUH BETTE EINE BRUH BRUH BE HERE	
2. Principal Place of Business 3.		3. Mailing Address			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		01192006 Chg-NP CR2E037 (11/05)	
City & State	City & State City & State			4. FEI Number Applied For 11-3707932 Not Applied	
Zip	Country	Zip	Country	5. Certificate of Status Desired Security Securi	
	6. Name and Address of Current F	Registered Agent		7. Name and Address of New Registered Agent	$\sqsupset$
WESTFAL	I JOHN		Name		
16630 N. DALE MABRY HWY TAMPA, FL 33618			Street Address	s (P.O. Box Number is Not Acceptable)	
			City	FL Zip Code	
	named entity submits this statement for ions of registered agent.	the purpose of changing its	registered office or regis	stered agent, or both, in the State of Florida. I am familiar with, and acce	ept
SIGNATURE .	Signature, typed or printed name of registered agent a	ind title if applicable. (NOTE	Registered Agent signature requ	ired when reinstating) DATE	
	Filing Fee is \$61.25 Due by May 1, 2006	9. Election Carr Trust Fund C	paign Financing ontribution.	\$5.00 May Be Added to Fees  Make check payable to Florida Department of State	
10.	OFFICERS AND DIF	ECTORS	11. o P	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TIFLE	DPST	Delete	TITLE TOP 1	IONCUR, DENNIS Change XIAddii	lition
NAME STREET ADDRESS	WESTFALL, JOHN W 16630 N. DALE MABRY HWY			TAMPA, FL 33626	
City-St-Zip	TAMPA, FL 33618		CITY-ST-ZIP	11/K/1-1/1 / C 3505 Q	
TITLE	D	Delete	TITLE	STZKE, BEATRIZ Change Addi	lition
name Street address	WESTFALL, CAROL 16630 N. DALE MABRY HWY		DESCRIPTION OF THE PROPERTY OF	1373 COUNTRYWAY ISCUE,	
CITY-ST-ZIP	TAMPA, FL 33618		CITY-ST-ZIP	AMPA, FL 33626	ŀ
TITLE	D	Delete	TITLE S	M. CHRISTINA Change XAddi	ition
name Street address	MYERS, STEVEN L 13623 N. FLORIDA AVE.	-	NAME STREET ADDRESS 1	M CHRISTINA BLUB,	1
CITY-ST-ZIP	TAMPA, FL 33613		CITY-ST-ZIP	M, CHRISTINA 357 COUNTRYWAY BLUB, TAMPA, FL 33626	
TITLE		☐ Delete	TITLE	Change Kaddi	lition
NAME			NAME W	1345 COUNTRYWAY BLVA.	
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP	rampa, FL 33626	
TITLE		☐ Defete	TITLE	Change DXADDI	fition
NAME				1339 COUNTRY WAY BLUD.	ĺ
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	AMPA, FL 33626	
TITLE		☐ Delete	TITLE	☐ Change ☐ Addi	dition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP	and it what the information are also desired.	this filing door not smallfully	CITY-ST-ZIP	and in Chapter 119. Florida Statutes I further partie, that the information	
iz. i nereby	cerury that the information supplied with	true and accurate and that a	use exemplions contain v eignature chall have th	ned in Chapter 119, Florida Statutes. I further certify that the information he same legal effect as if made under oath; that I am an officer or direct	71

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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

MILLIAM MATERMAN