2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N03000008893

City-St-Zip:

JACKSONVILLE, FL 32223

TI FILED
Oct 01, 2008
Secretary of State

Entity Name: GREENLAND INDUSTRIAL PARK WAREHOUSE CONDOMINIUM OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

6510 COLUMBIA PARK DR 12058 SAN JOSE BLVD. SUITE 1 SUITE 203

JACKSONVILLE, FL 32257 JACKSONVILLE, FL 32223

Current Mailing Address: New Mailing Address:

8641 BAYPINE ROAD P.O. BOX 600033

SUITE 1 JACKSONVILLE, FL 32260 JACKSONVILLE, FL 32256

FEI Number: 20-0436603 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

PROPERTY SERVICES INC PROPERTY MANAGEMENT PARTNERS OF ST. JOHNS

8641 BAYPINE ROAD 12058 SAN JOSE BLVD.

SUITE 1 SUITE 203

JACKSONVILLE, FL 32256 US JACKSONVILLE, FL 32223 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: ELAINE BROOKS 10/01/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

City-St-Zip:

JACKSONVILLE, FL 32260

itle: T () Delete Title: P (X) Change () Addition

 Name:
 PORTER, JIM
 Name:
 FRENCH, DAVID

 Address:
 12347 CORMORANT DR
 Address:
 P.O. BOX 600033

Title: P () Delete Title: T (X) Change () Addition Name: FRENCH, DAVID Name: PORTER, JIM

Address: 6510 COLOMBIA PARK DR #101 Address: P.O. BOX 600033

City-St-Zip: JACKSONVILLE, FL 32258 City-St-Zip: JACKSONVILLE, FL 32260

Title: S () Delete Title: S (X) Change () Addition

 Name:
 PERAZA, NELSON
 Name:
 PERAZA, NELSON

 Address:
 2488 RIDGE WILL DR
 Address:
 P.O. BOX 600033

City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip: JACKSONVILLE, FL 32260

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: ELAINE BROOKS O 10/01/2008