

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04060

FILED
Apr 13, 2009
Secretary of State

Entity Name: OAK RIDGE BUSINESS PARK OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1860 OLD OKEECHOBEE ROAD
SUITE 205
WEST PALM BEACH, FL 33401 US

New Principal Place of Business:

Current Mailing Address:

1860 OLD OKEECHOBEE ROAD
SUITE 205
WEST PALM BEACH, FL 33401 US

New Mailing Address:

FEI Number: 59-2634811

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WECHSLER, DAN
1860 OLD OKEECHOBEE RD., #106
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

MCAFEE, PAMELA
1860 OLD OKEECHOBEE RD., #205
WEST PALM BEACH, FL 33409 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: PAMELA MCAFEE

04/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: INGUI, ROSEMARIE
Address: 1860 OLD OKEECHOBEE ROAD SUITE 104
City-St-Zip: WEST PALM BEACH, FL 33409

Title: P () Delete
Name: WECHSLER, DAN
Address: 1860 OLD OKEECHOBEE RD. #105
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: V () Delete
Name: GRUBER, DAVID
Address: 1860 OLD OKEECHOBEE RD. #204
City-St-Zip: WEST PALM BEACH, FL 33409

Title: T () Delete
Name: MCAFEE, PAMELA
Address: 1860 OLD OKEECHOBEE ROAD SUITE 205
City-St-Zip: WEST PALM BEACH, FL 33409 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: INGUI, ROSEMARIE
Address: 1860 OLD OKEECHOBEE ROAD SUITE 104
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: P (X) Change () Addition
Name: MARKS, STEVEN
Address: 10745 LOCUST STREET
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: V (X) Change () Addition
Name: GRUBER, DAVID
Address: 1860 OLD OKEECHOBEE RD. #204
City-St-Zip: WEST PALM BEACH, FL 33409 US

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: PAMELA MCAFEE

T

04/13/2009

Electronic Signature of Signing Officer or Director

Date