2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000001039

Entity Name: AMIRA OFFICE PARK ASSOCIATION, INC.

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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9857 OLD ST AUGUSTINE ROAD 1403-1 DUNN AVENUE SUITE 5 JACKSONVILLE, FL 32218

JACKSONVILLE, FL 32257

Current Mailing Address: New Mailing Address:

9857 OLD ST AUGUSTINE ROAD
SUITE 5
JACKSONVILLE, FL 32257

1403-1 DUNN AVENUE
JACKSONVILLE, FL 32218

FEI Number: 20-2649669 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:

EL-HASSAN, MARC M
9857 OLD ST AUGUSTINE ROAD
SUITE 5
JACKSONVILLE, FL 32257 US
INGRAM, SONJA M
1403-1 DUNN AVENUE
JACKSONVILLE, FL 32218 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: SONJA INGRAM 04/27/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 EL-HASSAN, MARC M
 Name:
 REGAN, JEFF

 Address:
 9857-5 OLD ST AUGUSTINE ROAD
 Address:
 1403-1 DUNN AVENUE

 City-St-Zip:
 JACKSONVILLE, FL 32257
 City-St-Zip:
 JACKSONVILLE, FL 32218

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

 Name:
 Name:
 MORGAN, JOYCE

 Address:
 Address:
 1403-1 DUNN AVENUE

 City-St-Zip:
 City-St-Zip:
 JACKSONVILLE, FL 32218

Title: SEC () Change (X) Addition

 Name:
 Name:
 TERRY, MELINDA

 Address:
 Address:
 1403-1 DUNN AVENUE

 City-St-Zip:
 City-St-Zip:
 JACKSONVILLE, FL 32218

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: SONJA INGRAM MGR 04/27/2009