

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006869

FILED
Apr 13, 2009
Secretary of State

Entity Name: HIGHLAND OFFICE PARK PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2050 CHATSWORTH WAY
TALLAHASSEE, FL 32309

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3252
TALLAHASSEE, FL 32315

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AKHAVAN, SOHEIL
2050 CHATSWORTH WAY
TALLAHASSEE, FL 32309 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: DP () Delete
Name: AKHAVAN, SOHEIL
Address: P.O. BOX 3252
City-St-Zip: TALLAHASSEE, FL 32315

Title: DVPT () Delete
Name: AKHAVAN, SOHRAB
Address: P.O. BOX 3252
City-St-Zip: TALLAHASSEE, FL 32315

Title: DS () Delete
Name: AKHAVAN, MOJGAN
Address: P.O. BOX 3252
City-St-Zip: TALLAHASSEE, FL 32315

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: OKONKOW, PETER
Address: P.O. BOX 3252
City-St-Zip: TALLAHASSEE, FL 32315

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DS (X) Change () Addition
Name: AKHAVAN, SOHEIL
Address: P.O. BOX 3252
City-St-Zip: TALLAHASSEE, FL 32315

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: SOHEIL AKHAVAN

DS

04/13/2009

Electronic Signature of Signing Officer or Director

Date