


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2006 8:00 am
Secretary of State

01-12-2006 90172 030 ****61.25

DOCUMENT # N05000007774	
1. Entity Name INTERSTATE OFFICE PARK OWNER'S ASSOCIATION, INC.	

Principal Place of Business 7545 W UNIVERSITY AVE SUITE B GAINESVILLE, FL 32607	Mailing Address 7545 W UNIVERSITY AVE SUITE B GAINESVILLE, FL 32607
---------------------------------------------------------------------------------------	---------------------------------------------------------------------------

40001171



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01062006 Chg-NP CR2E037 (11/05)

4. FEI Number	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
---------------	--------------------------------------------------------------------------------------------

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
-----------------------------------------------------------	---------------------------------------

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
SALTER, JAMES D 3940 NW 16TH BLVD BLDG B GAINESVILLE, FL 32605		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL	Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE
-----------	--------------------------------------------------------------------------------------------------------------------------------------------	------

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
-----------------------------------------------------	-------------------------------------------------------------------------------------	---------------------------------------	--------------------------------------------------------------

10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
	DP	JOYNER, MILLARD K	7545 W UNIVERSITY AVE SUITE B GAINESVILLE, FL 32607				
	DVST	WAGNER, RICHARD	7545 W UNIVERSITY AVE SUITE B GAINESVILLE, FL 32607				
	DAST	SALTER, JAMES D	7545 W UNIVERSITY AVE SUITE B GAINESVILLE, FL 32607				

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 	Millard K. Joyner, DP	Date: 1/6/06	Phone #: 352-382-8121
------------------------------------------------------------------------------------------------	-----------------------	--------------	-----------------------