

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008909

FILED  
May 11, 2011  
Secretary of State

**Entity Name:** THE MAHAN PROFESSIONAL CENTER PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

1334 TIMBERLANE ROAD  
SUITE 6  
TALLAHASSEE, FL 32312

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 12368  
TALLAHASSEE, FL 32317

**New Mailing Address:**

**FEI Number:** 20-5020092

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KEENA, CHRIS M  
1334 TIMBERLANE ROAD  
SUITE 6  
TALLAHASSEE, FL 32312 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: P  
Name: BALDOCK, WILLIAM DR  
Address: 2621 MITCHAM DRIVE SUITE 101  
City-St-Zip: TALLAHASSEE, FL 32308

Title: VP  
Name: HARPER, LARRY DR  
Address: 2452 MAHAN DRIVE  
City-St-Zip: TALLAHASSEE, FL 32308

Title: T  
Name: BALDOCK, RHONDA  
Address: 2621 MITCHAM DRIVE SUITE 101  
City-St-Zip: TALLAHASSEE, FL 32308

Title: S  
Name: HILAMAN, LINDA  
Address: 1614 MAHAN CENTER DRIVE SUITE 101  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D  
Name: MCBROOM, JOHN DR  
Address: 2617 MITCHAM DRIVE SUITE 101  
City-St-Zip: TALLAHASSEE, FL 32308

Title: D  
Name: GOLDEN, JACK DR  
Address: 1618 MAHAN CENTER DRIVE SUITE 101  
City-St-Zip: TALLAHASSEE, FL 32308

I hereby 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 all other like empowered.

SIGNATURE: DR. WILLIAM P. BALDOCK

MGRM

05/11/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date