

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 18, 2008
Secretary of State

DOCUMENT# N06000001387

Entity Name: BRIERWOOD OFFICE PARK OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**1325 HENDRICKS AVENUE
JACKSONVILLE, FL 32207**New Principal Place of Business:**8613 OLD KINGS ROAD SOUTH
501
JACKSONVILLE, FL 32217**Current Mailing Address:**P. O. BOX 47715
JACKSONVILLE, FL 32247**New Mailing Address:**8613 OLD KINGS ROAD SOUTH
501
JACKSONVILLE, FL 32217**FEI Number:****FEI Number Applied For ()****FEI Number Not Applicable (X)****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MCCORVEY, MIKE E
1325 HENDRICKS AVENUE
JACKSONVILLE, FL 32207 US**Name and Address of New Registered Agent:**CARTER, GRETA
8613 OLD KINGS ROAD SOUTH
JACKSONVILLE, FL 32217 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: GRETA CARTER

06/18/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MCCORVEY, MIKE E
Address: 1325 HENDRICKS AVENUE
City-St-Zip: JACKSONVILLE, FL 32207

Title: DVPS () Delete
Name: MORGAN, MONICA L
Address: 1325 HENDRICKS AVENUE
City-St-Zip: JACKSONVILLE, FL 32207

Title: D () Delete
Name: PERRY, T. KEITH
Address: 1325 HENDRICKS AVENUE
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: VINING, STEVE P
Address: 8613 OLD KINGS RD SOUTH 602
City-St-Zip: JACKSONVILLE, FL 32217

Title: VPS (X) Change () Addition
Name: VILLARED, DANIEL V
Address: 8613 OLD KINGS RD. SOUTH 402
City-St-Zip: JACKSONVILLE, FL 32217

Title: ST (X) Change () Addition
Name: RASEY, GLORIA
Address: 8613 OLD KINGS ROAD SOUTH 403
City-St-Zip: JACKSONVILLE, FL 32217

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: GLORIA RASEY

ST

06/18/2008

Electronic Signature of Signing Officer or Director

Date