2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002553

FILED Apr 30, 2008 Secretary of State

Entity Name: PALM RIDGE PLAZA PROPERTY OWNERS' ASSOCIATION INC.

Current Principal Place of Business: New Principal Place of Business: 9000 REGENCY SQUARE BLVD, SUITE 200 JACKSONVILLE, FL 32211 **Current Mailing Address: New Mailing Address:** 9000 REGENCY SQUARE BLVD, SUITE 200 JACKSONVILLE, FL 32211 FEI Number: 20-8945677 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: ROHAN, PAUL 9000 REGENCY SQUARE BLVD, SUITE 107 JACKSONVILLE, FL 32211 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **DPVS** () Delete () Change () Addition ROHAN, PAUL Name: Name: Address: 9000 REGENCY SQUARE BLVD, SUITE 107 Address: City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: Title: Title: () Delete () Change () Addition Name: ROHAN, PAUL Name: Address: 9000 REGENCY SQUARE BLVD. SUITE 200 Address: City-St-Zip: JACKSONVILLE, FL 32211 City-St-Zip: Title: () Delete Title: () Change () Addition HOROWITZ, JON Name: Name: 354 WINTHROP BLVD Address: Address: City-St-Zip: TEANECK, NJ 07666 City-St-Zip: () Delete Title: Title: () Change () Addition Name: EVANS, GREG Name: 9000 REGENCY SQUARE BLVD, SUITE 200 Address: Address: City-St-Zip: JACKSONVILLE, FL 32211 City-St-Zip:

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: PAUL ROHAN PRIN 04/30/2008