2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003496

Apr 05, 2009 Secretary of State

Entity Name: GATE PARKWAY WEST PROFESSIONAL CENTER OWNER'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

9000 CYPRESS GREEN DR 9218 CYPRESS GREEN DR SUITE 107B

SUITE 1 JACKSONVILLE, FL 32256 JACKSONVILLE, FL 32256

Current Mailing Address: New Mailing Address:

9000 CYPRESS GREEN DR 9218 CYPRESS GREEN DR SUITE 107B SUITE 1

JACKSONVILLE, FL 32256 JACKSONVILLE, FL 32256

FEI Number: 03-0613807 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

STARLING, JOHN STARLING, JOHN 9000 CYPRESS GREEN DR 9218 CYPRESS GREEN DR SUITE 107B SUITE 1 JACKSONVILLE, FL 32256 US JACKSONVILLE, FL 32256 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: JOHN STARLING 04/05/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition BREITMOSER, HENRY E BREITMOSER, HENRY E Name: Name: 8075 GATE PARKWAY WEST #201 Address: 8075 GATE PARKWAY WEST #201 Address: City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: JACKSONVILLE, FL 32216

Title: VPD Title: (X) Change () Addition () Delete

JENKINS, JEFF Name: JENKINS, JEFF Name:

Address: 8075 GATE PARKWAY WEST #201 Address: 8075 GATE PARKWAY WEST #201 City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: JACKSONVILLE, FL 32216

Title: STD () Delete Title: STD (X) Change () Addition GIORGETTI, VICKI DOWNING, RANDY Name: Name:

8075 GATE PARKWAY WEST #302 8075 GATE PARKWAY WEST #203 Address: Address:

City-St-Zip: JACKSONVILLE, FL 32216 City-St-Zip: JACKSONVILLE, FL 32216

Title: () Delete Title: () Change (X) Addition

Name: Name: GULANI, ARUN

8075 GATE PARKWAY WEST #101 Address: Address: City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32216

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: JEFF JENKINS Ρ 04/05/2009