

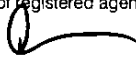
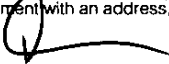


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2008 8:00 am
Secretary of State

01-18-2008 90005 015 ****61.25

DOCUMENT # N06000007561					
1. Entity Name BELLWETHER PROFESSIONAL PARK PROPERTY OWNERS' ASSOCIATION, INC.				Principal Place of Business 2201 SE 30TH AVE OCALA, FL 34471	
Mailing Address 2603 SE 17TH ST. SUITE A OCALA, FL 34471				40005912 	
2. Principal Place of Business - No P.O. Box # 2201 SE 30th Avenue Suite, Apt. #, etc. Suite 201 City & State Ocala FL Zip 34471 Country USA		3. Mailing Address 2201 SE 30th Avenue Suite, Apt. #, etc. Suite 201 City & State Ocala FL Zip 34471 Country USA		01072008 Chg-NP CR2E037 (12/06)	
4. FEI Number 20-8476138				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 WIECHENS, CHRISTOPHER S 2603 SE 17TH STREET SUITE A OCALA, FL 34471	
7. Name and Address of New Registered Agent Name: Wiechens, Christopher S. Street Address (P.O. Box Number is Not Acceptable): 2201 SE 30th Avenue Suite 201 City: Ocala FL Zip Code: 34471				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:  Christopher S. Wiechens 1/8/08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>	
Filing Fee is \$81.25 Due by May 1, 2008		9. Election Campaign Financing <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	PD MENDOLA, ANTHONY P P.O. BOX 6331 OCALA, FL 34478	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Davis Dinkins PO Box 6331 Ocala, FL 34478	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DINKINS, DAVIS P.O. BOX 6331 OCALA, FL 34478	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Joe London PO Box 6331 Ocala, FL 34478	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST OWEN, DAVID P.O. BOX 6331 OCALA, FL 34478	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Managing Member Christopher S. Wiechens 2201 SE 30th Avenue, Suite 201 Ocala, FL 34471	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:  Christopher S. Wiechens 1/8/08 352-622-3214 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					