2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2011
Secretary of State

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Entity Name: BAYMEADOWS EAST PROFESSIONAL CENTER OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

9191 R.G. SKINNER PARKWAY
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

7400 BAYMEADOWS WAY, SUITE 317
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 20-5832542 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COMMUNITY MANAGEMENT CONCEPTS OF JAX. FL
7400 BAYMEADOWS WAY, SUITE 317
JACKSONVILLE, FL 32256 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: PD
Name: HAGHIGHI, MICHAEL MD
Address: 9191 R.G. SKINNN ER PKWY STE 901
City-St-Zip: JACKSONVILLE, FL 32256

Title: D
Name: HASHEY, TERRY MD
Address: 9191 R.G. SKINNER PKWY STE 603&604
City-St-Zip: JACKSONVILLE, FL 32256

Title: D
Name: PATTERSON, GUY
Address: 9191 RG SKINNER PKWY STE 303&304
City-St-Zip: JACKSONVILLE, FL 32256

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: MELODY R. GRIFFITH LCAM 01/05/2011

Electronic Signature of Signing Officer or Director — Date