## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000011456

FILED Apr 26, 2012 Secretary of State

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

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

9191 R.G. SKINNER PARKWAY JACKSONVILLE, FL 32256

Current Mailing Address: New Mailing Address:

7400 BAYMEADOWS WAY, SUITE 317 JACKSONVILLE, FL 32256

FEI Number: 20-5832542 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:

COMMUNITY MANAGEMENT CONCEPTS OF JAX. FL 7400 BAYMEADOWS WAY, SUITE 317 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:

Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:** 

Title: PRES

Name: HAGHIGHI, MICHAEL MD

Address: 7400 BAYMEADOWS WAY, SUITE 317

City-St-Zip: JACKSONVILLE, FL 32256

Title: VP

Name: HASHEY, TERRY MD

Address: 7400 BAYMEADOWS WAY, SUITE 317

City-St-Zip: JACKSONVILLE, FL 32256

Title: SECY

Name: PATTERSON, GUY

Address: 7400 BAYMEADOWS WAY, SUITE 317

City-St-Zip: JACKSONVILLE, FL 32256

Title: TRES

Name: PATTERSON, GUY

Address: 7400 BAYMEADOWS WAY, SUITE 317

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: MICHAEL HAGHIGHI, MD PRES 04/26/2012