

**2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Oct 08, 2012**  
**Secretary of State**

DOCUMENT# N07000007656

**Entity Name:** TIMUQUANA OFFICE PARK ASSOCIATION, INC.**Current Principal Place of Business:**12756 MARSH COVE DR S  
JACKSONVILLE, FL 32224**New Principal Place of Business:**6215 WILSON BOULEVARD  
BLDG. 5-B  
JACKSONVILLE, FL 32210**Current Mailing Address:**12756 MARSH COVE DR S  
JACKSONVILLE, FL 32224**New Mailing Address:**6215 WILSON BOULEVARD  
BLDG. 5-B  
JACKSONVILLE, FL 32210**FEI Number:** 22-3920270**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**DUCKRO, JOHN E  
12756 MARSH COVE DR S  
JACKSONVILLE, FL 32224 US**Name and Address of New Registered Agent:**RAGSDALE, CHARLES T  
6215 WILSON BOULEVARD  
JACKSONVILLE, FL 32210 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: CHARLES T. RAGSDALE

10/08/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: RAGSDALE, CHARLES T  
Address: 6215 WILSON BOULEVARD  
City-St-Zip: JACKSONVILLE, FL 32210

Title: VP  
Name: TOWERS, ELIZABETH M  
Address: 4077 LONDON ROAD  
City-St-Zip: JACKSONVILLE, FL 32207

Title: ST  
Name: WOODBERY, SHARON  
Address: 4139 TIMUQUANA ROAD  
City-St-Zip: JACKSONVILLE, FL 32210

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: SHARON WOODBERY

ST

10/08/2012

Electronic Signature of Signing Officer or Director

Date