FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 JAN 23 AM 9:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N09857 (6)

1. Corporation Name

THE NORTHEAST FLORIDA CHAPTER OF THE NATIONAL AS SOCIATION OF INDUSTRIAL AND OFFICE PARKS, INC.

Principal Place of Business	Mailing Address
% KEVIN BEASLEY 50 N. LAURA ST., STE. 2700 JACKSONVILLE FL 32202	% KEVIN BEASLEY 50 N. LAURA ST., STE. 2700 JACKSONVILLE FL 32202

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/19/1985
3a. Date of Last Report: 03/16/1994
4. FEI Number: 59-2551921 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) Country (25)	Zip (29) Country (30)

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BEASLEY, KEVIN 50 N. LAURA ST. SUITE 2700 JACKSONVILLE FL 32202	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	D	☑ Change ☐ Addition
NAME	DYER, JACK	1.2 NAME		
STREET ADDRESS	1650 PRUDENTIAL DR, STE 303	1.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL	1.4 CITY-ST-ZIP		
TITLE	D	2.1 TITLE	V/D	☑ Change ☐ Addition
NAME	CONN, JEFFREY	2.2 NAME	JAMES P. CITRANO	
STREET ADDRESS	7785 BAYMEADOWS WAY	2.3 STREET ADDRESS	1301 RIVERPLACE BLVD.	
CITY-ST-ZIP	JACKSONVILLE FL	2.4 CITY-ST-ZIP	JACKSONVILLE, FL 32207	
TITLE	SVD	3.1 TITLE	P/D	☑ Change ☐ Addition
NAME	LINING, JOHN	3.2 NAME		
STREET ADDRESS	7785 BAYMEADOWS WAY	3.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL	3.4 CITY-ST-ZIP		
TITLE	TD	4.1 TITLE		☐ Change ☐ Addition
NAME	BEASLEY, KEVIN	4.2 NAME		
STREET ADDRESS	50 N. LAURA ST., SUITE 2700	4.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL	4.4 CITY-ST-ZIP		
TITLE	D	5.1 TITLE		☐ Change ☐ Addition
NAME	COLEY, W. ALEY	5.2 NAME		
STREET ADDRESS	7800 BELFORT PARKWAY, SUITE 110	5.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL	5.4 CITY-ST-ZIP		
TITLE	D	6.1 TITLE	S/D	☑ Change ☐ Addition
NAME	READ, MARK	6.2 NAME	JOHN CASTORINA	
STREET ADDRESS	121 W FORSYTH, #100	6.3 STREET ADDRESS	1200 RIVERPLACE BLVD. # 315	
CITY-ST-ZIP	JACKSONVILLE FL	6.4 CITY-ST-ZIP	JACKSONVILLE, FL 32207	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: J. Kevin Beasley J. KEVIN BEASLEY 1-15-95 904-355-2521
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0001210