2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# N10146

Entity Name: ORANGE PARK MEDICAL PLAZA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O MICHAEL MAYO
2001 KINGSLEY AVENUE
ORANGE PARK, FL 32073 US

New Principal Place of Business:

1895 KINGSLEY AVENUE
ORANGE PARK, FL 32073 US

Current Mailing Address:

767 BLANDING BLVD
103
ORANGE PARK, FL 32073 US

New Mailing Address:

FEI Number: 59-2614291 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EASLEY, MARSHA A
2001 KINGSLEY AVENUE
ORANGE PARK, FL 32073 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 ( ) Delete
Name: LOHSE, DEAN M.D.
Address: 2001 KINGSLEY AVE.
City-St-Zip: ORANGE PARK, FL 32073

Title: VD ( ) Delete
Name: MAZRAHI, EDWARD M.D.
Address: 2001 KINGSLEY AVE.
City-St-Zip: ORANGE PARK, FL 32073

Title: STD ( ) Delete
Name: EASLEY, MARSHA A
Address: 2001 KINGSLEY AVENUE
City-St-Zip: ORANGE PARK, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: LOHSE, DEAN M.D.
Address: 3627 UNIVERSITY BLVD. SOUTH, SUITE 355
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: VD (X) Change ( ) Addition
Name: MAZRAHI, EDWARD M.D.
Address: 1895 KINGSLEY AVENUE, SUITE 401
City-St-Zip: ORANGE PARK, FL 32073 US

Title: STD (X) Change ( ) Addition
Name: EASLEY, MARSHA A
Address: 2001 KINGSLEY AVENUE
City-St-Zip: ORANGE PARK, FL 32073 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MARSHA EASLEY ST 04/29/2009

Electronic Signature of Signing Officer or Director — Date