2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14734

FILED Jan 29, 2009 Secretary of State

Entity Name: PORT COMMERCE CENTER III PROPERTY OWNERS ASSOCIATION, INC.

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

5220 HOOD RD 905 US HIGHWAY ONE

SUITE 100 SUITE G

PALM BEACH GARDENS, FL 33418 US LAKE PARK, FL 33403 US

Current Mailing Address: New Mailing Address:

5220 HOOD RD 905 US HIGHWAY ONE

SUITE 100 SUITE G
PALM BEACH GARDENS, FL 33418 US LAKE PARK, FL 33403

FEI Number: 65-0036587 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:

CROMWELL, HENRY F
905 U.S. HIGHWAY ONE
SUITE 600
LAKE PARK, FL 33403 US

CROMWELL, HENRY F
905 U.S. HIGHWAY ONE
SUITE G
LAKE PARK, FL 33403 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: 01/29/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

US

Title: PTD () Delete Title: PTD (X) Change () Addition Name: GAETA, LOUIS A JR Name: CROMWELL, HENRY F

Address: 5220 HOOD RD SUITE 100 Address: 905 U.S. HIGHWAY ONE, SUITE G

City-St-Zip: PALM BEACH GARDENS, FL 33418 City-St-Zip: LAKE PARK, FL 33403

Title: SD () Delete Title: () Change () Addition
Name: ASTMAN, HELEN Name:
Address: 652 BFVFRWYCK PI Address:

Address: 652 BEVERWYCK PL Address: City-St-Zip: PARAMUS, NJ 07652 City-St-Zip:

Title: VD () Delete Title: VD (X) Change () Addition Name: SHELTON, STEVEN B Name: SHELTON, ALEX

Address: 1862 DR. MARTIN LUTHE KING BLVD Address: 1862 DR. MARTIN LUTHE KING BLVD

City-St-Zip: RIVIERA BEACH, FL 33404 City-St-Zip: RIVIERA BEACH, FL 33404

Title: () Delete Title: D () Change (X) Addition

Name: Name: DRAGONE. PAUL

Address: SR 710 & CONGRESS AVE City-St-Zip: SIVIERA BEACH, FL 33404

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: HENRY F. CROMWELL PTD 01/29/2009