2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16971

FILED Apr 21, 2011 Secretary of State

Entity Name: SHALIMAR OFFICE CENTRE TOWNOFFICE ASSOCIATION, INC.

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

1 ELEVENTH AVE 6 ELEVENTH AVE SHALIMAR CENTRE' E-2 STE G-4

SHALIMAR, FL 32579 US SHALIMAR, FL 32579 US

Current Mailing Address: New Mailing Address:

SHALIMAR CENTRE PO BOX 235

FORT WALTON BEACH, FL 32549 US

FEI Number: 59-2885294 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:

WHITE, RICHARD J.

91 COUNTRY CLUB RD.

SHALIMAR, FL 32579 US

BOYETTE, WAYNE T SR
318 SANTA ROSA BLVD
UNIT W-701

FORT WALTON BEACH, FL 32548 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: WAYNE T BOYETTE 04/21/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VD

Name: BOYETTE, WAYNE T

Address: 381 SANTA ROSA BLVD, UNIT W-701 City-St-Zip: FORT WALTON BEACH, FL 32548

Title: PD

Name: CNCW INVESTMENT PARTNERSHIP I LTD

Address: 184 TWELVE OAKS LANE City-St-Zip: FREEPORT, FL 32439

Title: DMD

Name: GOODPASTER, HOWARD T Address: 101 POQUITO ROAD City-St-Zip: SHALIMAR, FL 32579

Title:

Name: KISER, JAMES R

Address: 611 N OVERBROOK DRIVE City-St-Zip: FORT WALTON BEACH, FL 32547

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: WAYNE T BOYETTE VD 04/21/2011