2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23072

FILED Mar 31, 2009 Secretary of State

Entity Name: HUNTINGTON OFFICE PARK OWNERS' ASSOCIATION, INC.

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

701 ENTERPRISE RD E 704 701 ENTERPRISE RD E

SAFETY HARBOR, FL 34695 STE 405

SAFETY HARBOR, FL 34695 US

Current Mailing Address: New Mailing Address:

701 ENTERPRISE RD E 704 701 ENTERPRISE RD E

STE 405 SAFETY HARBOR, FL 34695

SAFETY HARBOR, FL 34695 US

FEI Number: 59-2858893 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:

WALKER, EDWARD H 2675 WAXWOOD COURT CLEARWATER, FL 33761 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:

City-St-Zip:

City-St-Zip:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

CLEARWATER, FL 33761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete CRIST, JOHN P.D. II CRIST, JOHN P D Name: Name: 2951 EAGLE TRAIL E Address: 2951 EAGLE TRAIL E Address:

City-St-Zip: CLEARWATER, FL 33761 City-St-Zip: CLEARWATER, FL 33761

Title: () Delete Title: (X) Change () Addition Name: WALKER, EDWARD H. Name: WALKER, EDWARD H Address: 2675 WAXWOOD CT Address: 2675 WAXWOOD CT City-St-Zip: CLEARWATER, FL City-St-Zip: CLEARWATER, FL 33761

Title: () Change () Addition

Title: () Delete CRIST, JILL K Name: Name: 2743 BURNING TREE LANE Address: Address:

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: EDWARD H WALKER PD 03/31/2009