

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28689

FILED
Jul 08, 2004
Secretary of State

Entity Name: PROFESSIONAL PARK OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O EVAN E. DUSSIA, II
1911 MICCOSUKEE ROAD
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

C/O EVAN E. DUSSIA, II
1911 MICCOSUKEE ROAD
TALLAHASSEE, FL 32308

New Mailing Address:

C/O PRICE H VINCENT
PO BOX 14106
TALLAHASSEE, FL 32317

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUSSIA, EVAN EARL II M.D.
1911 MICCOSUKEE RD.
TALLAHASSEE, FL 32308

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: DUSSIA, EVAN E., II,
Address: 1911 MICCOSUKEE RD.
City-St-Zip: TALLAHASSEE, FL

Title: VD () Delete
Name: MCLARTY, E. LYNN,
Address: 1904 MICCOSUKEE ROAD
City-St-Zip: TALLAHASSEE, FL

Title: D () Delete
Name: MUNASIFI, FAISEL,
Address: 1407 M.D. LANE
City-St-Zip: TALLAHASSEE, FL

Title: ED () Delete
Name: VINCENT, PRICE H. JR, .
Address: 560 FRANKSHAW RD
City-St-Zip: TALLAHASSEE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: EVAN EARL DUSSIA JR

PD

07/08/2004

Electronic Signature of Signing Officer or Director

_____ Date