

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39609

FILED
Feb 20, 2008
Secretary of State

Entity Name: EAST LAFAYETTE OFFICE ASSOCIATION, INC.

Current Principal Place of Business:

%SOHEIL AKHAVAN
1331 E LAFAYETTE ST
TALLAHASSEE, FL 323014724

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3252
TALLAHASSEE, FL 32315

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AKHAVAN, SOHEIL
1933 CHATSWORTH
TALLAHASSEE, FL 32308 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: AKHAVAN, SOHEIL
Address: 1933 CHATSWORTH
City-St-Zip: TALLAHASSEE, FL 32308

Title: STD () Delete
Name: AKHAVAN, SOHRAB
Address: 2050 CHATSWORTH WAY
City-St-Zip: TALLAHASSEE, FL

Title: VD () Delete
Name: AKHAVAN, REZVAN
Address: 4799 HIGH GROVE
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:

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: SOHRABAKHAVAN

STD

02/20/2008

Electronic Signature of Signing Officer or Director

Date