2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2002 8:00 am
Secretary of State
01-30-2002 90159 009 ****61.25

DOCUMENT # N44187

1. Entity Name

NORTHAMPTON OFFICE PARK OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2928 WELLINGTON CIRCLE [illegible] STE 201 TALLAHASSEE FL [illegible] US	2928 WELLINGTON CIR [illegible] SUITE 201 TALLAHASSEE FL [illegible]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2928 Wellington Circle Suite, Apt. #, etc.	2928 Wellington Circle Suite, Apt. #, etc.
City & State	City & State
Zip 32309 Country	Zip 32309 Country

4. FEI Number 59-3073474 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GOODWIN, ELLA H 2928 WELLINGTON CIR [illegible] STE 201 TALLAHASSEE FL [illegible]	Name Street Address (P.O. Box Number is Not Acceptable) 2928 Wellington Circle City FL Zip Code 32309

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP VISCONTI, FRANK L 2928 WELLINGTON CIRCLE [illegible] STE 201 TALLAHASSEE FL [illegible]	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 2928 Wellington Circle Ste. 201 Tallahassee FL 32309
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV O'BRIEN, TIMOTHY J ~~2928 WELLINGTON CIRCLE E~~ TALLAHASSEE FL [illegible]	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 2928 Wellington Circle Suite 201 Tallahassee FL 32309
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DST GOODWIN, ELLA H 2928 ~~WELLINGTON~~ CIR [illegible] STE 201 TALLAHASSEE FL [illegible]	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 2928 Wellington Circle Suite 201 Tallahassee FL 32309
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CR2E037 (9/01)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 1-16-2002 850-668-2211
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #