

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46849

FILED
Feb 13, 2007
Secretary of State

Entity Name: SECOND STREET PROFESSIONAL CENTER ASSOCIATION, INC.

Current Principal Place of Business:

2143 NE 2ND ST
OCALA, FL 34470 US

New Principal Place of Business:

Current Mailing Address:

2143 NE 2ND ST
OCALA, FL 34470 US

New Mailing Address:

FEI Number: 59-3180905

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIEFER, SCOTT
2143 NE 2ND STREET
OCALA, FL 34470 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: D () Delete
Name: COCHRANE, JAMES
Address: 2141 NE 2ND ST
City-St-Zip: OCALA, FL 34470

Title: D () Delete
Name: CHAMCHIL, MORAD,
Address: 2139-A NE 2ND STREET
City-St-Zip: OCALA, FL 34470

Title: PD () Delete
Name: KIEFER, SCOTT R,
Address: 2143 N.E. 2ND STREET
City-St-Zip: OCALA, 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 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: SCOTT R KIEFER

PRES

02/13/2007

Electronic Signature of Signing Officer or Director

Date