

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000410

FILED
Apr 30, 2009
Secretary of State

Entity Name: COLLEGE PARK ASSOCIATION INC.

Current Principal Place of Business:

170-G COLLEGE DRIVE
ORANGE PARK, FL 32065 US

New Principal Place of Business:

Current Mailing Address:

170-G COLLEGE DRIVE
ORANGE PARK, FL 32065 US

New Mailing Address:

FEI Number: 65-0375060

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENDER, CHARLES A
170 COLLEGE DRIVE
SUITE G
ORANGE PARK, FL 32065 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: DPS () Delete
Name: MORTON, GENE A.
Address: 170-E COLLEGE DRIVE
City-St-Zip: ORANGE PARK, FL 32065

Title: DPT () Delete
Name: BENDER, CHARLES A
Address: 170-G COLLEGE DR.
City-St-Zip: ORANGE PARK, FL 32065

Title: D () Delete
Name: MODLIN, TERRY
Address: 170-G COLLEGE DR
City-St-Zip: ORANGE PARK, FL 32065

Title: DVPT () Delete
Name: GATZ, RICHARD
Address: 170-H COLLEGE DR
City-St-Zip: ORANGE PARK, FL 32065

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: MORTON, GENE A
Address: 170-E COLLEGE DRIVE
City-St-Zip: ORANGE PARK, FL 32065

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: C. ALLEN BENDER

D,P

04/30/2009

Electronic Signature of Signing Officer or Director

Date