2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005622

FILED Apr 30, 2009 Secretary of State

Entity Name: WESTLINKS BUSINESS PARK PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

24301 WALDEN CENTER DRIVE., STE 300 BONITA SPRINGS, FL 34134

Current Mailing Address: New Mailing Address:

8409 NO. MILITARY TRL, STE 123 C/O CHERRY. EDGAR & SMITH, PA PALM BEACH GARDENS, FL 33410

FEI Number: 65-0572217 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HASTINGS, VIVIEN N 24301 WALDEN CENTER DRIVE., STE 300 BONITA SPRINGS, FL 34134 US

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:

Fladeric Construct David and American

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:STD () DeleteTitle:STD (X) Change () AdditionName:CALDWELL, DAVIDName:DVOROZNAK, BRIANAddress:24301 WALDEN CENTER DR.Address:24301 WALDEN CENTER DR.City-St-Zip:BONITA SPRINGS, FL 34134City-St-Zip:BONITA SPRINGS, FL 34134

Title: PD () Delete Title: DV (X) Change () Addition

Name: BOYD, CONNIE Name: BOYD, CONNIE

Address: 24301 WALDEN CENTER DR Address: 24301 WALDEN CENTER DR City-St-Zip: BONITA SPRINGS, FL 34134 City-St-Zip: BONITA SPRINGS, FL 34134

Title: VD () Delete Title: DP (X) Change () Addition

Name:DVOROZNAK, BRIANName:D'ALESSANDRO, EDAddress:24301 WALDEN CENTER DR.Address:24301 WALDEN CENTER DR.City-St-Zip:BONITA SPRINGS, FL 34134City-St-Zip:BONITA SPRINGS, FL 34134

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: BRIAN DVOROZNAK S 04/30/2009