2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2007
Secretary of State

DOCUMENT# N94000000001

Entity Name: BUILDING F OF A PORTION OF LOT 2 OF METROCORP CENTER ASSOCIATION, INC.

Current Principal Place of Business:

4101 NW 37 PLACE
SUITE B
GAINESVILLE, FL 32606 US

New Principal Place of Business:

Current Mailing Address:

4101 NW 37 PLACE
SUITE B
GAINESVILLE, FL 32606 US

New Mailing Address:

FEI Number: 59-3334264 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DARWIN, HOLLY M
4101 NW 37 PLACE
SUITE B
GAINESVILLE, FL 32606 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:	DARWIN, TIM	
Address:	4101 NW 37 PLACE	
City-St-Zip:	GAINESVILLE, FL 32606	
Title:	VD	( ) Delete
Name:	STRAUSS, CYD	
Address:	4101 NW 37 PLACE SUITE A	
City-St-Zip:	GAINESVILLE, FL 32606	
Title:	SDY	( ) Delete
Name:	DARWIN, HOLLY M	
Address:	4101 NW 37 PLACE, SUITE B	
City-St-Zip:	GAINESVILLE, FL 32606	
Title:	TD	( ) Delete
Name:	BRANTLY, KATHRIN	
Address:	4101 NW 37 PLACE, SUITE A	
City-St-Zip:	GAINESVILLE, FL 32606	

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:	
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: HOLLY M. DARWIN, D.C. SDY 03/02/2007

Electronic Signature of Signing Officer or Director — Date