

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001625

FILED
Mar 14, 2011
Secretary of State

Entity Name: ST. AUGUSTINE INDUSTRIAL PARK ASSOCIATION, INC.

Current Principal Place of Business:

C/O ST. AUGUSTINE INDUSTRIAL PARK ASSO.
10151 DEERWOOD PARK BLVD, BLDG 100 STE 330
JACKSONVILLE, FL 32256

New Principal Place of Business:

C/O ST. AUGUSTINE INDUSTRIAL PARK ASSO.
4601 TOUCHTON RD E, BLDG 300, STE 3200
JACKSONVILLE, FL 32246

Current Mailing Address:

C/O ST. AUGUSTINE INDUSTRIAL PARK ASSO.
10151 DEERWOOD PARK BLVD, BLDG 100 STE 330
JACKSONVILLE, FL 32256

New Mailing Address:

C/O ST. AUGUSTINE INDUSTRIAL PARK ASSO.
4601 TOUCHTON RD E, BLDG 300, STE 3200
JACKSONVILLE, FL 32246

FEI Number: 59-3259474

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOENER, JAMES A ESQ.
10151 DEERWOOD PARK BLVD.
BUILDING 100, SUITE 330
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

HOENER, JAMES A ESQ.
4601 TOUCHTON RD E
BUILDING 300, SUITE 3200
JACKSONVILLE, FL 32246 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:

03/14/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: STORMES, JEANNE
Address: 4601 TOUCHTON RD E, BLDG 300, STE 3200
City-St-Zip: JACKSONVILLE, FL 32246

Title: DVP
Name: TINNEMAN, WILLIAM R
Address: 5 WILLARD DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: VPT
Name: MUHL, E. JOSEPH JR.
Address: 4601 TOUCHTON RD E, BLDG 300, STE 3200
City-St-Zip: JACKSONVILLE, FL 32246

Title: DVP
Name: TARANTIN, THOMAS A
Address: 86 VANDERVEER ROAD
City-St-Zip: FREEHOLD, NJ 07728

Title: AS
Name: POSTON, CHRISTY
Address: 4601 TOUCHTON RD E, BLDG 300, STE 3200
City-St-Zip: JACKSONVILLE, FL 32246

Title: S
Name: HOENER, JAMES A
Address: 4601 TOUCHTON RD E, BLDG 300, STE 3200
City-St-Zip: JACKSONVILLE, FL 32246

I hereby 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 all other like empowered.

SIGNATURE: CHRISTY POSTON

AS

03/14/2011

Electronic Signature of Signing Officer or Director

Date