2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2009
Secretary of State

DOCUMENT# N95000003791

Entity Name: AIRPORT DISTRIBUTION CENTER PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 59-3342784 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HART, JR., JAMES W
SENTRY MANAGEMENT INC.
2180 W SR 434, SUITE 5000
LOGWOOD, FL 327795044 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: FREEMAN, JAMIE
Address: 8811 BOGGY CREEK RD
City-St-Zip: ORLANDO, FL 32824

Title: VPD ( ) Delete
Name: MCLAUGHLIN, KURT
Address: 622 EAST WASHINGTON ST #300
City-St-Zip: ORLANDO, FL 32801

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change ( ) Addition
Name: MCLAUGHLIN, KURT
Address: 9500 SATELLITE BLVD STE 170
City-St-Zip: ORLANDO, FL 32824

Title: TSD ( ) Change (X) Addition
Name: VAH, MARTIN
Address: 9143 BOGGY CREEK RD
City-St-Zip: ORLANDO, FL 32824

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: JAMIE FREEMAN PD 04/07/2009

Electronic Signature of Signing Officer or Director — Date