2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2005
Secretary of State

DOCUMENT# N97000004247

Entity Name: MID-PINELLAS OFFICE PARK OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

4500 140TH AVENUE NORTH
SUITE 101
CLEARWATER, FL 34622

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 17309
CLEARWATER, FL 346220309

New Mailing Address:

FEI Number: 59-2190489 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ENGELHARDT, STEVEN E
4500 140TH AVENUE NORTH
SUITE 101
CLEARWATER, FL 34622 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:	ENGELHARDT, DANIEL A	
Address:	4500 140TH AVENUE NORTH, SUITE 101	
City-St-Zip:	CLEARWATER, FL 34622	
Title:	VPST	( ) Delete
Name:	ENGELHARDT, STEVEN E	
Address:	4500 140TH AVENUE NORTH	
City-St-Zip:	CLEARWATER, FL 34622	
Title:	D	( ) Delete
Name:	ENGELHARDT, STEVEN E	
Address:	4500 140TH AVENUE NORTH	
City-St-Zip:	CLEARWATER, FL 34622	
Title:	VPST	( ) Delete
Name:	ENGELHARDT, PAUL D	
Address:	4500 140TH AVENUE NORTH	
City-St-Zip:	CLEARWATER, FL 34622	
Title:	D	( ) Delete
Name:	ENGELHARDT, PAUL D	
Address:	4500 140TH AVENUE NORTH	
City-St-Zip:	CLEARWATER, FL 34622	

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:	
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 Section 119.07(3)(i), 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: STEVEN E ENGELHARDT VPST 01/05/2005

Electronic Signature of Signing Officer or Director — Date