2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2007
Secretary of State

DOCUMENT# N97000005575

Entity Name: WESTON BUSINESS CENTER OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

3424 PEACHTREE ROAD, N.E.
SUITE 1500
ATLANTA, GA 30326

New Principal Place of Business:

Current Mailing Address:

3424 PEACHTREE ROAD, N.E.
SUITE 1500
ATLANTA, GA 30326

New Mailing Address:

FEI Number: 58-2438165 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND
PLANTATION, FL 33324 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:	ZEHL, RICHARD	
Address:	515 EAST LAS OLAS BLVD, SUITE 960	
City-St-Zip:	FORT LAUDERDALE, FL 33301	
Title:	VPD	( ) Delete
Name:	MOTES, MIKA	
Address:	3424 PEACHTREE RD, NE, SUITE 1500	
City-St-Zip:	ATLANTA, GA 30326	
Title:	SD	( ) Delete
Name:	KNOX, JACKIE	
Address:	3424 PEACHTREE ROAD, N.E., SUITE 1500	
City-St-Zip:	ATLANTA, GA 30326	
Title:	TD	( ) Delete
Name:	WILSON, RACHEL	
Address:	3424 PEACHTREE ROAD, N.E. SUITE 1500	
City-St-Zip:	ATLANTA, GA 30326	

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: RACHEL WILSON TD 02/28/2007

Electronic Signature of Signing Officer or Director — Date