

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

m/ **FILED**
Mar 19, 2007 08:00 AM
Secretary of State

DOCUMENT # N99000003549

1. Entity Name
**EASTPORT BUSINESS PARK OWNERS ASSOCIATION,
INC.**



Principal Place of Business
**4320 WOODLAND PARK DRIVE
WEST MELBOURNE, FL 32904**

Mailing Address
**4320 WOODLAND PARK DRIVE
WEST MELBOURNE, FL 32904**

DO NOT WRITE IN THIS SPACE



02092007 No Chg-NP CR2E037 (4/06)

4. FEI Number
59-3646316

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**PALMETTO CHARTER SERVICES, INC.
150 MAGNOLIA AVE.
DAYTONA BEACH, FL 32114**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
ANDERSON, W. ROBERT JR.
4320 WOODLAND PARK DRIVE
WEST MELBOURNE, FL 32904**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
INGRAM, BRUCE
4320 WOODLAND PARK DRIVE
WEST MELBOURNE, FL 32904**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CUNNINGHAM, GARY R II
4320 WOODLAND PARK DRIVE
WEST MELBOURNE, FL 32904**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000673058
03/29/07-80014-002 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

W. Robert Anderson, Jr.
W. ROBERT ANDERSON, JR.

3/12/07

321-723-3400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #