2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005279

FILED Mar 17, 2009 Secretary of State

Entity Name: CAMBRIDGE PROFESSIONAL OFFICE PARK OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

16630 NORTH DALE MABRY HWY 16630 NORTH DALE MABRY HWY

TAMPA, FL 336181400 TAMPA, FL 336181400 US

Current Mailing Address: New Mailing Address:

16630 NORTH DALE MABRY HWY 16630 NORTH DALE MABRY HWY

TAMPA, FL 336181400 US

FEI Number: 65-0726899 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WESTFALL, JOHN
16630 N. DALE MABRY HIGHWAY
WESTFALL, JOHN
16630 N. DALE MABRY HIGHWAY

TAMPA, FL 33618 US TAMPA, FL 336181400 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: JOHN WESTFALL 03/17/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PD (X) Change () Addition

 Name:
 ANDERSON, BRUCE
 Name:
 ANDERSON, BRUCE

 Address:
 719 W FLETCHER AVE
 Address:
 719 W FLETCHER AVE

 City-St-Zip:
 TAMPA, FL 33612
 City-St-Zip:
 TAMPA, FL 33612 US

Title: S () Delete Title: S (X) Change () Addition

 Name:
 MARSTON, JOHN
 Name:
 MARSTON, JOHN

 Address:
 727 W FLETCHER AVE
 Address:
 727 W FLETCHER AVE

 City-St-Zip:
 TAMPA, FL 33612
 City-St-Zip:
 TAMPA, FL 33612 US

Title: TD () Delete Title: TD (X) Change () Addition

 Name:
 REDMON, KATHLEEN
 Name:
 REDMON, KATHLEEN

 Address:
 707 WEST FLETCHER AVE
 Address:
 707 WEST FLETCHER AVE

 City-St-Zip:
 TAMPA, FL 33612
 City-St-Zip:
 TAMPA, FL 33612 US

Title: D () Delete Title: D (X) Change () Addition

 Name:
 WITTERSHEIM, JANE
 Name:
 WITTERSHEIM, JANE

 Address:
 727 W. FLETCHER AVE.
 Address:
 727 W. FLETCHER AVE.

 City-St-Zip:
 TAMPA, FL 33612
 City-St-Zip:
 TAMPA, FL 33612 US

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: KATHLEEN REDMON TD 03/17/2009