

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Jun 12, 2012
Secretary of State**

DOCUMENT# N99000005873

Entity Name: NORTH PORT PARK OF COMMERCE ASSOCIATION, INC.**Current Principal Place of Business:**3073 S. HORSESHOE DR.
SUITE 118
NAPLES, FL 34104**New Principal Place of Business:**2 NORTH TAMIAMI TRAIL
SUITE 312
SARASOTA, FL 34236 US**Current Mailing Address:**3073 S. HORSESHOE DR.
SUITE 118
NAPLES, FL 34104**New Mailing Address:**2 NORTH TAMIAMI TRAIL
SUITE 312
SARASOTA, FL 34236 US**FEI Number:** 59-3631051**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ARNOLD, DONALD L
3073 S. HORSESHOE DRIVE
SUITE 118
NAPLES, FL 34104 US**Name and Address of New Registered Agent:**THE LAW OFFICES OF LOBECK & HANSON, P.A.
2033 MAIN STREET
SUITE 403
SARASOTA, FL 34237 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: JEREMY V. ANDERSON, ESQ./LOBECK & HANSON

06/12/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPT
Name: LANG, ANSON
Address: 2 NORTH TAMIAMI TRAIL, SUITE 312
City-St-Zip: SARASOTA, FL 34236 US

Title: DVS
Name: MORTIMER, READ
Address: 2 NORTH TAMIAMI TRAIL, SUITE 312
City-St-Zip: SARASOTA, FL 34236 US

Title: D
Name: WEST, MICHAEL
Address: 2 NORTH TAMIAMI TRAIL, SUITE 312
City-St-Zip: SARASOTA, FL 34236 US

I hereby 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 all other like empowered.

SIGNATURE: ANSON LANG

DPT

06/12/2012

Electronic Signature of Signing Officer or Director

Date