
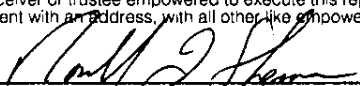


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 01, 2008 08:00 AM
Secretary of State

| | | |
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| DOCUMENT # P06000018672 | |  |
| 1. Entity Name NORTHWEST BUSINESS PARK HOMEOWNER'S ASSOCIATION, INC. | | |
| Principal Place of Business 1410 NW 13TH STREET SUITE #9 GAINESVILLE, FL 32601 US | Mailing Address 1410 NW 13TH STREET SUITE #9 GAINESVILLE, FL 32601 US | |
| DO NOT WRITE IN THIS SPACE | | |
| 6. Name and Address of Current Registered Agent SHEMA, RONALD J 1410 NW 13TH STREET SUITE #9 GAINESVILLE, FL 32601 | | 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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
| 10. OFFICERS AND DIRECTORS | | U000000939922 05/28/08-80044-025 150.00 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D SHEMA, RONALD J 1410 NW 13TH STREET, SUITE #9 GAINESVILLE, FL 32601 | DO NOT WRITE IN THIS SPACE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PS SHEMA, RONALD J 1410 NW 13TH ST STE 9 GAINESVILLE, FL 32601 | |
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| 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 607, 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:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | | Date 4-29-08 Daytime Phone # 326 4608 |