

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2007 8:00 am
Secretary of State

03-01-2007 90004 016 ****61.25

DOCUMENT # 762271 1. Entity Name PROVINCETOWN CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business P & M PROPERTY MGMT 15660 SAN CARLOS BLVD FORT MYERS, FL 33908 US		Mailing Address 3400 NEW SO PROVINCE BLVD FORT MYERS, FL 33907 US	
2. Principal Place of Business - No P.O. Box # PROVINCETOWN CONDO ASSO. INC. Suite, Apt. #, etc. 3400 NEW SO PROVINCE BLVD City & State FT MYERS, FLA Zip 33907		3. Mailing Address Suite, Apt. #, etc. SAME City & State SAME Zip LEE	
4. FEI Number 59-1507784		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SHIPLEY, CHARLES D 3400 NEW SO PROVINCE BLVD FORT MYERS, FL 33907		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 <u>CHARLES D. SHIPLEY, MGR -</u> <u>Mar. - 1/8/07.</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$81.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERG, BOB 3265-4 PRINCE EDWARD ISLE FORT MYERS, FL 33907	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JOHN R. BERG <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD THOMPSON, SCOTT 3349-3 ALOUETTE CIR FORT MYERS, FL 33907	TITLE NAME STREET ADDRESS CITY-ST-ZIP	THOMPSON, Scott <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DICE, MARK 3303-2 ROYAL CANADIAN TRACE FT MYERS, FL 33907	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 6978 PICKADILLY CT FT MYERS, FL 33919
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS LEPORE, ANGELA 5840-3 VANCOUVER CIRCLE FORT MYERS, FL 33907	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition D DAVID HAYLETT 3354-3 YUKON CIR. FT MYERS, FL 33907
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SCOPPETTUOLO, BOB 3300-2 NEW SO PROVINCE BLVD FORT MYERS, FL 33907	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition BOB SCOPPETTUOLO
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NELMBRECHT, MIKE 3258-1 MAPLE LEAF CIR FORT MYERS, FL 33907	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition MIKE HELMBRECHT
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: <u>SEC</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<u>2/13/07 - 239/939-5535</u> <small>Date Daytime Phone #</small>	