

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762271

FILED
Apr 12, 2012
Secretary of State

Entity Name: PROVINCETOWN CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

PROVINCETOWN CONDO ASSO. INC
3400 NEW SO PROVINCE BLVD
FORT MYERS, FL 33907 US

New Principal Place of Business:

Current Mailing Address:

PROVINCETOWN CONDO ASSO. INC
3400 NEW SO PROVINCE BLVD
FORT MYERS, FL 33907 US

New Mailing Address:

FEI Number: 59-1507784

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHIPLEY, CHARLES D
3400 NEW SO PROVINCE BLVD
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPS
Name: O'HART, SALLY
Address: 3363-2 YUKON CIRCLE
City-St-Zip: FORT MYERS, FL 33907

Title: D
Name: LEONARD, CHARLES
Address: 3354-1 YUKON CIRCLE
City-St-Zip: FORT MYERS, FL 33907

Title: T
Name: DICE, MARK
Address: 1630 SE 40TH STREET
City-St-Zip: CAPE CORAL, FL 33904

Title: P
Name: PLOSKI, ROBERT
Address: 3312-1 NEW SOUTH PROVINCE BLVD.
City-St-Zip: FORT MYERS, FL 33907

Title: D
Name: HAYLETT, DAVID
Address: 3354-3 YUKON CIRCLE
City-St-Zip: FORT MYERS, FL 33907

Title: D
Name: HELMBRECHT, MYRON
Address: 3258-1 MAPLE LEAF CIR
City-St-Zip: FORT MYERS, FL 33907

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: CHARLES D. SHIPLEY

MGR

04/12/2012

Electronic Signature of Signing Officer or Director

Date