

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 762271

**Entity Name:** PROVINCETOWN CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**PROVINCETOWN CONDO ASSO. INC  
3400 NEW SO PROVINCE BLVD  
FORT MYERS, FL 33907**Current Mailing Address:**PROVINCETOWN CONDO ASSO. INC  
3400 NEW SO PROVINCE BLVD  
FORT MYERS, FL 33907 US**FEI Number: 59-1507784****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SHIPLEY, CHARLES D  
3400 NEW SO PROVINCE BLVD  
FORT MYERS, FL 33907 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:**\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**Officer/Director Detail :**Title S  
Name O'HART, SALLY  
Address 3363-2 YUKON CIRCLE  
City-State-Zip: FORT MYERS FL 33907Title P  
Name DICE, MARK  
Address 1630 SE 40TH STREET  
City-State-Zip: CAPE CORAL FL 33904Title D  
Name HAYLETT, DAVID  
Address 3354-3 YUKON CIRCLE  
City-State-Zip: FORT MYERS FL 33907Title T  
Name KOOSMANN, CINDY  
Address 3285-1 ROYAL CANADIAN TRACE  
City-State-Zip: FORT MYERS FL 33907Title VP  
Name SCOPPETTUOLO, ROBERT  
Address 3300-2 NEW SO PROVINCE BLVD  
City-State-Zip: FORT MYERS FL 33907Title D  
Name PLOSKI, ROBERT  
Address 3312-1 NEW SOUTH PROVINCE BLVD.  
City-State-Zip: FORT MYERS FL 33907Title D  
Name HELMBRECHT, MYRON  
Address 3258-1 MAPLE LEAF CIR  
City-State-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: MARK DICE****P****03/05/2013**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date