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FILED
May 20 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 762271 (5)

1. Corporation Name

PROVINCETOWN CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
C/O MARY LU WAHL CAM 3400 NEW S PROVINCE BLVD FT MYERS FL 33907	C/O MARY LU WAHL CAM 3400 NEW S PROVINCE BLVD FT MYERS FL 33907-5202

3. Date Incorporated or Qualified: 03/03/1982
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / Country — 25 / Zip — 29 / Country — 30

4. FEI Number: 59-1507784 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

WAHL, MARY LU CAM
3400 NEW SOUTH PROVINCE BLVD
FT MYERS FL 33907

10. Name and Address of New Registered Agent

81 Name: Charles Claypool
82 Street Address (P.O. Box Number is Not Acceptable): 3400 New South Province Blvd.
83
84 City: Fort Myers FL 85 Zip Code: 33907

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Chuck Claypool CHUCK CLAYPOOL CHAIRMAN 5-13-97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DS	☒ DELETE	1.1 TITLE	DP	☒ Change ☐ Addition
NAME	ARZY, JERRY		1.2 NAME	Charles Claypool	
STREET ADDRESS	3340-3 NEW S PROVINCE BL		1.3 STREET ADDRESS	14360 McGregor Blvd.	
CITY-ST-ZIP	FT MYERS FL		1.4 CITY-ST-ZIP	Fort Myers, FL 33919	
TITLE	D	☒ DELETE	2.1 TITLE	DV	☐ Change ☒ Addition
NAME	NICCOLLS, JAMES		2.2 NAME	Lee Ratliff	
STREET ADDRESS	3306-2 NEW S PROVINCE BL		2.3 STREET ADDRESS	5797-3 Newfoundland Circle	
CITY-ST-ZIP	FT MYERS FL		2.4 CITY-ST-ZIP	Fort Myers, FL 33907	
TITLE	DAT	☒ DELETE	3.1 TITLE	DS	☐ Change ☒ Addition
NAME	MACPHERSON, RAYNOLD		3.2 NAME	Marjorie Zuspann	
STREET ADDRESS	3291-4 PRINCE EDWARD ISLE		3.3 STREET ADDRESS	3284-2 Royal Canadian Trace	
CITY-ST-ZIP	FT MYERS FL		3.4 CITY-ST-ZIP	Fort Myers, FL 33907	
TITLE	DP	☒ DELETE	4.1 TITLE	DAT	☒ Change ☐ Addition
NAME	BALLARD, LYNANN		4.2 NAME	James Niccolls	
STREET ADDRESS	3363-2 YUKON CIR		4.3 STREET ADDRESS	3306-2 New South Province Blvd.	
CITY-ST-ZIP	FT MYERS FL		4.4 CITY-ST-ZIP	Fort Myers, Fl 33907	
TITLE	D	☒ DELETE	5.1 TITLE	D	☒ Change ☐ Addition
NAME	PROPPS, GEORGE		5.2 NAME	Raynold MacPherson	
STREET ADDRESS	5861 WILD FIG LANE		5.3 STREET ADDRESS	3291-4 Prince Edward Isle	
CITY-ST-ZIP	FT. MYERS FL		5.4 CITY-ST-ZIP	Fort Myers, FL 33907	
TITLE	DV	☒ DELETE	6.1 TITLE	D	☐ Change ☒ Addition
NAME	CLAYPOOL, CHARLES		6.2 NAME	Mary Jansen	
STREET ADDRESS	593 VAL MAR DRIVE		6.3 STREET ADDRESS	3369-4 Yukon Circle	
CITY-ST-ZIP	FT MYERS FL		6.4 CITY-ST-ZIP	Fort Myers, FL 33907	

CR2E037 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Chuck Claypool CHUCK CLAYPOOL 4/26 941-939-5535