


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2007 8:00 am
Secretary of State

01-22-2007 90080 040 ****61.25

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1. Entity Name
 FRUITVILLE OFFICE PARK CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address
 3277 FRUITVILLE RD. 3277 FRUITVILLE RD.
 UNIT F UNIT F
 SARASOTA, FL 34237 SARASOTA, FL 34237

2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

40003385



01092007 Chg-NP CR2E037 (12/06)

4. FEI Number Applied For
 16-1630015 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SEWELL, LARRY E
 3277 FRUITVILLE RD. UNIT F
 SARASOTA, FL 34237

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City FL Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	SEWELL, E LARRY	
STREET ADDRESS	3277 FRUITVILLE RD. UNIT F	
CITY-ST-ZIP	SARASOTA, FL 34237	
TITLE	VDS	<input type="checkbox"/> Delete
NAME	WILSON, CHARLES H	
STREET ADDRESS	2341 PORTER LAKE DRIVE #207	
CITY-ST-ZIP	SARASOTA, FL 34240	
TITLE	D	<input type="checkbox"/> Delete
NAME	MOORE, S WILLIAM	
STREET ADDRESS	3277 FRUITVILLE RD. UNIT E	
CITY-ST-ZIP	SARASOTA, FL 34237	
TITLE	TD	<input type="checkbox"/> Delete
NAME	HAWKINS, MICHAEL W	
STREET ADDRESS	330 S PINEAPPLE AVE	
CITY-ST-ZIP	SARASOTA, FL 34236	
TITLE	SD	<input type="checkbox"/> Delete
NAME	WUNDERLIN, PATRICIA A	
STREET ADDRESS	3277 FRUITVILLE RD. UNIT 2B	
CITY-ST-ZIP	SARASOTA, FL 34237	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	8221 Blaikie Court	
CITY-ST-ZIP	Sarasota, FL 34240	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: E. LARRY SEWELL 1/15/07 941.365.5111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #