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NONPROFIT CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

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SANIBEL PROFESSIONAL CENTER CONDOMINIUM ASSOCIAT ION, INC.

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9. Name and Address of Current Registered Agent DAVIES, LAUREN CUSTOM MANAGEMENT SERVICES 1597 SANDCASTLE ROAD 8. AND ELETE 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutus, 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 submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Such change was authorized by the corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutus, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutus, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutus, the above-named corporation submits this statement for the purpose of changing its registered difference in the purpose of changing its registered agent, or both, in the State of Florida Statutus, the above-named corporation submits this statement for the purpose of changing its registered difference in the purpose of changing its registered agent, or both, in the State of Florida Statutus, the above-named corporation submits this statement for the purpose of changing its registered difference in the purpose of changing its registered agent, or both, in the State of Florida Statutus, the above-named corporation submits this statement for the purpose of changing its registered difference in the purpose of changing its registered agent, or both, in the state of Florida Statutus, the above-named corporation submits this statement for the purpose of changing its registered difference in the purpose of changing its registered agent, or both, in the state of Florida Statutus, the above-named corporation submits this statement for the purpose of changing its registered d	24 25 28 30 9. Name and Address of Current Registered Agent DAVIES, LAUREN CUSTOM MANAGEMENT SERVICES 1597 SANDCASTLE ROAD SANIBEL FL 33957 84 City	
DAVIES, LAUREN CUSTOM MANAGEMENT SERVICES 1597 SANDCASTLE ROAD SANIBEL FL 33957 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purgose 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 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 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 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 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 amount is such as a complete of the appointment as registered agent. I amount is such as a complete of the appointment as registered agent. I amount is such as a complete of the appointment as registered agent. I amount is such as a complete of the appointment as registered agent. I amount is such as a complete of the appointment as registered agent. I amount is such as a complete of the appointment as registered agent. I amount is such as a complete of the appointment as registered agent. I amount is such as a complete of the appointment as registered agent. I amount is such as a complete of the appointment as registered agent. I amount is such as a complete of the appointment as registered agent. I amount is such as a complete of the appointment as registered agent. I amount is such as a complete of the appointment as registered agent. I amount is such as a complete of the appointmen	DAVIES, LAUREN CUSTOM MANAGEMENT SERVICES 1597 SANDCASTLE ROAD SANIBEL FL 33957 B1 Name 82 Street Addres 83 84 City	
DAMES, LAUREN CUSTOM MANAGEMENT SERVICES 1597 SANDCASTLE ROAD SANIBEL FL 33957 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, and later with, and accept the obligations of, Section 617 0503, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE PD OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS IN 12 11. Pursuant to the provisions of Section 617 0503, Florida Statutes. MOTE: Registered Agent signature requires when rehabiting DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS IN 12 11. Pursuant to the provisions of Section 617 0503, Florida Statutes. MAME SHORACK, WILLIAM STREET ADDRESS 2323 WOOSTER LANE #6 13 STREET ADDRESS 2323 WOOSTER LANE #6 13 STREET ADDRESS 2323 WOOSTER LANE #6 23 STREET ADDRESS 23 STREET ADDRESS 23 WOOSTER LANE, #3 24 GITY-S1-27P SANIBEL FL STD DELETE 31 TITLE STD D	DAVIES, LAUREN CUSTOM MANAGEMENT SERVICES 1597 SANDCASTLE ROAD SANIBEL FL 33957 B4 City	10. Name and Address of New Registered Agent
CUSTOM MANAGEMENT SERVICES 1597 SANDCASTLE ROAD SANIBEL FL 33957 84 City FL 85 Zip Code 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 Signature, typed or printed name of tequated agent and title 4 epricable PD DELETÉ 11. ITILE PD DELETÉ 11. TILE SHORACK, WILLIAM 12. NAME SHORACK, WILLIAM SIRGET ADDRESS 23.23 WOOSTER LANE #6 13. SIRGET ADDRESS CITY-S1-ZIP NAME KAULBER, MARK 22. NAME 14. City NAME SANIBEL FL 14. City-S1-ZIP SANIBEL FL 14. City-S1-ZIP TILE STD DELETE 31. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS IN 12 12. NAME 13. SIRGET ADDRESS 23.23 WOOSTER LANE #6 13. SIRGET ADDRESS 23.23 WOOSTER LANE #6 13. SIRGET ADDRESS 23.23 WOOSTER LANE #6 13. SIRGET ADDRESS 24. City-S1-ZIP SANIBEL FL 14. City-S1-ZIP SANIBEL FL 32. NAME 33. SIRGET ADDRESS 34. City-S1-ZIP TILE DELETE 41. TILLE DELETE 41. TILLE Change Addition	CUSTOM MANAGEMENT SERVICES 1597 SANDCASTLE ROAD 8ANIBEL FL 33957 84 City	
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### City ### B\$ Zip Code 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 agent, are both, in the State of Florida Statutes, the above-named corporation's board of directors. Thereby accept the appointment as registered agent, are both, in the State of Florida Statutes. ### SIGNATURE 12.	SANIBEL FL 33957	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above 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 Signature Type or printed name of registered agent and Mitor appricable. (MOTE: Registered agent	j vila i i i i i i i i i i i i i i i i i i	95 7in Code
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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 directly 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.

FILED

Apr 28 1997 8:00am

Secretary of State