

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Nov 14, 2004
Secretary of State**

DOCUMENT# N20977

Entity Name: KEY WEST PROFESSIONAL CENTRE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1342 COLONIAL BLVD
K101
FT MYERS, FL 33907 US

New Principal Place of Business:

1342 COLONIAL BLVD
SUITE 20
FT MYERS, FL 33907 US

Current Mailing Address:

1342 COLONIAL BLVD
K101
FT MYERS, FL 33907 US

New Mailing Address:

1342 COLONIAL BLVD
SUITE 20
FT MYERS, FL 33907 US

FEI Number: 65-0006856 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HULL, ROBERT A
1342 COLONIAL BLVD., STE C 20
FT 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: D () Delete
Name: HULL, ROBERT
Address: 1342 COLONIAL BLVD STE C-20
City-St-Zip: FORT MYERS, FL 33907

Title: D () Delete
Name: ZEHNER, LORA
Address: 1342 COLONIAL BLVD STE G501
City-St-Zip: FORT MYERS, FL

Title: D () Delete
Name: KAREH, AHMED
Address: 1342 COLONIAL BLVD
City-St-Zip: FT MYERS, FL 33907 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT A HULL

D

11/14/2004

Electronic Signature of Signing Officer or Director

_____ Date