

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000005810

**FILED**  
**Feb 02, 2018**  
**Secretary of State**  
**CC1603094983**

**Entity Name:** MCGREGOR LAKES CENTER OFFICE PARK ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O CPSWFL  
5220 SUMMERLIN COMMONS BLVD SUITE 500  
FORT MYERS, FL 33907

**Current Mailing Address:**

C/O CPSWFL  
5220 SUMMERLIN COMMONS BLVD SUITE 500  
FORT MYERS, FL 33907 US

**FEI Number: 65-0731001**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

R&A AGENTS, INC.  
ATTN: SAMUEL J. HAGAN, IV, ESQ.  
2320 FIRST STREET SUITE 1000  
FORT MYERS, FL 33901 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 DVPT  
Name HARARI, MAX J  
Address C/O CPSWFL  
5220 SUMMERLIN COMMONS BLVD  
SUITE 500  
City-State-Zip: FORT MYERS FL 33907

Title D/OP  
Name HARARI, MICHAEL  
Address C/O CPSWFL  
5220 SUMMERLIN COMMONS BLVD  
SUITE 500  
City-State-Zip: FORT MYERS FL 33907

Title D  
Name SAMUEL, J. HAGAN IV  
Address 2320 FIRST STREET SUITE 1000  
City-State-Zip: FORT MYERS FL 33901

*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: HARARI , MAX J**

**DVPT**

**02/02/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date