2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: SIGNATURE AND TYPED OR PRINTED HAME OF SIG

FILED Apr 29, 2008 8:00 am Secretary of State

DOCUMENT #,757445 1. Entity Name PUNTA RASSA CONDOMINIUM ASSOCIATION, INC.							0.	4-29-2008	90094 01	19 *****6.	1.25
3050 N HORSESHOE DRIVE STE 275			Mailing Address 3050 N HORSESHOE DRIVE STE 275 NAPLES, FL 34104				P 18872 1888 A 1778 1	(: ::::::::::::::::::::::::::::::::::::
2. Principal Place of Business - No P.O. Box #			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				03112008 CI	ng-NP	CR2E03	37 (12/06)	
City & State			City & State				4. FEI Number 59-227437	7			oplied For ot Applicable
Zip	Country		Zip Cou		ntry	5 Certificate of Status Desired				\$8.75 Add Fee Require	
6. Name and Address of Current Registered Agent							7. Name and Add	ress of New R	tegistered #	Agent	
KRAMER/	TRIAD M	GT GROUP LLC			Name						
3050 N HO SUITE 275	ORSESHO			Street Addres			O. Box Number is I	Not Acceptable	9)		-
NAPLES,	FL 34101			City						Zip Cod	- · ·
D Th									FL		
	named entity tions of regist	y submits this statement for ered agent.	the purpose of changing its	registered	a office or reg	gisterec	d agent, or both, in	the State of Flo	orida. I am i	lamiliar with,	and accept
SIGNATURE Off Roberts ag										5108	<u>. </u>
	Signalure.kylo	or printed name of registered agent an	nd title if applicable. (NOT!	E: Registered	Agent signaturis.ret	duired wh	nen reinstating)		DATE		
Filing Fee is \$61.25 Due by May 1, 2008			ŀ	9. Election Campaign Financing Trust Fund Contribution.							
	_						5.00 May Be dded to Fees	1		payable to tment of S	
10.	_		Trust Fund C		on.	AD		Flor	ida Depart	tment of S	tate
TITLE	Due by N	1ay 1, 2008 OFFICERS AND DIRE	Trust Fund C	11.	on. □	AD AD	dded to Fees	Flor	ida Depari	RECTORS IN	tate
TITLE NAME	ST POTTER,	OFFICERS AND DIRE	Trust Fund C	11. TITLE NAME	on. □	AD AD	dded to Fees	Flor	ida Depari	RECTORS IN	tate
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