

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2007 8:00 am
Secretary of State

03-09-2007 90002 018 ****61.25

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1. Entity Name
CORAL PROFESSIONAL COMPLEX CONDOMINIUM
ASSOCIATION, INC.



Principal Place of Business
923 DEL PRADO BLVD.
CAPE CORAL, FL 33990 US

Mailing Address
C/O PROFESSIONALLY YOURS INC.
PO BOX 100831
CAPE CORAL, FL 33910 US



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

02142007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2406790

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TEAGUE, GEORGE
PROFESSIONALLY YOURS, INC.
2517 SANTA BARBARA BLVD STE 11
CAPE CORAL, FL 33914

Name

Street Address (P.O. Box Number is Not Acceptable)

2503 Del Prado Blvd., #500
Cape Coral FL 33904

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME WYATT, DEBORAH
STREET ADDRESS 923 DEL PRADO BLVD. #101
CITY-ST-ZIP CAPE CORAL, FL 33990

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME DOMBY, STEVE
STREET ADDRESS 923 DEL PRADO BLVD. STE 107
CITY-ST-ZIP CAPE CORAL, FL 33990

TITLE Director ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME DEWAR, JUDDSON
STREET ADDRESS 923 DEL PRADO BLVD #205
CITY-ST-ZIP CAPE CORAL, FL 33990

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME ZELL, DOUGLAS
STREET ADDRESS 923 DEL PRADO BLVD STE 102
CITY-ST-ZIP CAPE CORAL, FL 33990

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP ☐ Change ☒ Addition
NAME John Wigglesworth
STREET ADDRESS 923 Del Prado #105
CITY-ST-ZIP CC FL 33990

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Pres. ☐ Change ☒ Addition
NAME John White
STREET ADDRESS 923 Del Prado #104
CITY-ST-ZIP CC FL 33990

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #