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2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 8:00 am
Secretary of State
04-16-2007 90076 033 ****61.25

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DOCUMENT # 768534

1. Entity Name
SPORTSMAN'S COVE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
15660 SAN CARLOS BLVD SUITE 40 FORT MYERS, FL 33908 US	15660 SAN CARLOS BLVD SUITE 40 FORT MYERS, FL 33908 US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

P & M Property Management
14360 So. Tamiami Trail, Unit B
Fort Myers, Florida 33912

P & M Property Management
14360 So. Tamiami Trail, Unit B
Fort Myers, Florida 33912

04052007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2394322

☐ 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
SAPP, PAUL C/O PEM PROPERTY MANAGEMENT 15660 SAN CARLOS BLVD, # 40 FORT MYERS, FL 33908	Name: Paul Sapp (P.O. Box Number is Not Acceptable) P & M Property Management 14360 So. Tamiami Trail, Unit B Fort Myers, Florida 33912 L Zip Code

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: Paul L Sapp 4-12-07
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MULLEN, KARIN 432 W ALPHA BELLBROOK RD. BEATERCREEK, OH 45434	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 14360 S. Tamiami Trail, Unit B Ft. Myers, FL 33912
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BEATLEY, JAY 6026 S IRWIN ST. INDIANAPOLIS, IN 46237	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ☐ Change ☐ Addition Cindy Apple 14360 S. Tamiami Trail, Unit B Ft. Myers, FL 33912
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DRAKE, THOMAS DREW 894 BUTTONWOOD DR., #214 FORT MYERS BEACH, FL 33931	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ☐ Change ☐ Addition Sharon Flannery 14360 S. Tamiami Trail, Unit B Ft. Myers, FL 33912
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD DAVIS, JAMES 348 LEISURE LANE CELINA, OH 45822	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 14360 S. Tamiami Trail, Unit B Ft. Myers, FL 33912
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SMITH, RICHARD 515 MANZER RD. BEAVERTON, MI 48612	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition 14360 S. Tamiami Trail, Unit B Ft. Myers, FL 33912
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

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: Karin Mullen Secretary 4/12/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #