

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 8:00 am
Secretary of State

04-16-2007 90076 031 ****61.25

40062644



DOCUMENT # 768820	
1. Entity Name SAN CARLOS SPRINGS CONDOMINIUM ASSOCIATION, INC.	
Principal Place of Business	Mailing Address

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

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14360 So. Tamiami Trail, Unit B
Fort Myers, Florida 33912

01122007 Chg-NP CR2E037 (12/06)

City & State	City & State	4. FEI Number 59-2392132	Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SAPP, PAUL P & M Property Management 14360 So. Tamiami Trail, Unit B Fort Myers, Florida 33912		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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I am familiar with, and accept the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept

SIGNATURE <u>Paul A. Sapp</u>	(NOTE: Registered Agent signature required when reinstating)	DATE <u>4-9-07</u>
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Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RUBADO, JEANNE 15660 SAN CARLOS BLVD. #40 FORT MYERS, FL 33908 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Rubado, Jeanne <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 14360 S. Tamiami Trail Unit B Fort Myers, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREEN, RANDY 15660 SAN CARLOS BLVD. #40 FORT MYERS, FL 33908 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SIT Green, Randy <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 14360 S. Tamiami Trail Unit B Ft. Myers, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FOREST, AUDREY 15660 SAN CARLOS BLVD. #40 FORT MYERS, FL 33908 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Woodworth, Sarah <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 14360 S. Tamiami Trail Unit B Ft. Myers, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: <u>Jeanne Rubado</u>	DATE: <u>3/21/07</u>	Daytime Phone #
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