

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 23, 2007 08:00 A
Secretary of State

DOCUMENT # N00988

1. Entity Name
26 WEST CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

5190 26TH STREET WEST
SUITE J
BRADENTON, FL 34207

Mailing Address

5190 26TH STREET WEST
SUITE J
BRADENTON, FL 34207



04172007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2516323

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GRIPPO, FRANK M.
5190 26TH STREET WEST
SUITE J
BRADENTON, FL 34207

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IN THIS SPACE**

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

000000726007
05/03/07-80044-023 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MCGRATH, JAMES 5190 26TH ST W S-A BRADENTON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD GRIPPO, FRANK M. 5190 26TH ST W S-J BRADENTON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SCOTT, JEFF 5190 26TH ST W S-I BRADENTON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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

Frank M. Grippo FRANK M. GRIPPO 4-17-07 (941) 788-1800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #