

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02042

FILED  
Feb 24, 2011  
Secretary of State

**Entity Name:** STICKNEY POINT OFFICE CENTER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2750 STICKNEY POINT ROAD, SUITE 201  
SARASOTA, FL 34231

**New Principal Place of Business:**

**Current Mailing Address:**

2750 STICKNEY POINT ROAD, SUITE 201  
SARASOTA, FL 34231

**New Mailing Address:**

FEI Number: 59-2420256

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DESJARLAIS, MARY LYNN  
2750 STICKNEY POINT ROAD, SUITE 201  
SARASOTA, FL 34231 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: ELLIS, GARY  
Address: 2750 STICKNEY POINT ROAD, SUITE 107  
City-St-Zip: SARASOTA, FL 34231

Title: TD  
Name: DESJARLAIS, MARY LYNN  
Address: 2750 STICKNEY POINT ROAD, STE 201  
City-St-Zip: SARASOTA, FL

Title: SD  
Name: KAZWELL, M. CATHERINE  
Address: 2750 STICKNEY POINT ROAD, SUITE 101  
City-St-Zip: SARASOTA, FL 34231

Title: D  
Name: ROTOLE, GREGORY S  
Address: 2750 STICKNEY PT RD STE 102  
City-St-Zip: SARASOTA, FL 34231

Title: D  
Name: ROUSSEY, RICK  
Address: 2750 STICKNEY PT RD STE 207  
City-St-Zip: SARASOTA, FL 34231

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MARY LYNN DESJARLAIS

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02/24/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date