

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008308

FILED  
Mar 26, 2007  
Secretary of State

**Entity Name:** SUNTREE-VIERA PROFESSIONAL CENTER CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

903 JORDAN BLASS DRIVE  
SUITE # 102  
MELBOURNE, FL 32940

**New Principal Place of Business:**

**Current Mailing Address:**

903 JORDAN BLASS DRIVE  
SUITE # 102  
MELBOURNE, FL 32940

**New Mailing Address:**

**FEI Number:** 20-2048509

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ERIC, HARDOON  
903 JORDAN BLASS DRIVE  
SUITE # 102  
MELBOURNE, FL 32940 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: DP ( ) Delete  
Name: HARDOON, ERIC  
Address: 903 JORDAN BLASS DRIVE SUITE # 102  
City-St-Zip: MELBOURNE, FL 32940

Title: D ( ) Delete  
Name: MILITANO, KYLE  
Address: 2194 HWY A1A STE 101  
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: DS (X) Delete  
Name: KEARNEY, DR. WAYNE  
Address: 903 JORDAN BLASS DRIVE  
City-St-Zip: MELBOURNE, FL 32940

Title: D ( ) Delete  
Name: HARDOON, DR. ABE  
Address: 903 JORDAN BLASS DRIVE SUITE # 102  
City-St-Zip: MELBOURNE, FL 32940

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DS (X) Change ( ) Addition  
Name: HARDOON, DR. ABE  
Address: 903 JORDAN BLASS DRIVE SUITE # 102  
City-St-Zip: MELBOURNE, FL 32940

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ERIC HARDOON

D

03/26/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date