



# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 30, 2008 8:00 am**  
**Secretary of State**

04-30-2008 90184 039 \*\*\*\*61.25

<b>DOCUMENT # N03000008622</b> 1. Entity Name <b>DREW PROFESSIONAL PARK CONDOMINIUM ASSOCIATION, INC.</b>					
Principal Place of Business <b>2346 DREW ST CLEARWATER, FL 33765</b>			Mailing Address <b>2346 DREW ST CLEARWATER, FL 33765</b>		
2. Principal Place of Business - No P.O. Box # <b>2370 Drew St</b>		3. Mailing Address <b>2370 Drew St</b>		  04282008 Chg-NP CR2E037 (12/06)	
Suite, Apt. #, etc. <b>St A</b>		Suite, Apt. #, etc. <b>St A</b>			
City & State <b>Clearwater, FL</b>		City & State <b>Clearwater FL</b>			
Zip <b>33765</b>		Zip <b>33765</b>			
Country <b>USA</b>		Country <b>USA</b>		4. FEI Number <b>36-4553574</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>					
6. Name and Address of Current Registered Agent  <b>BEHLER, SCOTT C MD 2346 DREW ST CLEARWATER, FL 33765</b>			7. Name and Address of New Registered Agent Name <b>Glynis Wallace</b> Street Address (P.O. Box Number is Not Acceptable) <b>2370 Drew St St A</b> City <b>Clearwater</b> <b>FL</b> Zip Code <b>33765</b>		
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 <u><i>Glynis Wallace</i></u> <b>Glynis Wallace</b> <b>President</b> <b>4/28/08</b> <small>(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE)</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make check payable to Florida Department of State</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>D</b> <b>BEHLER, SCOTT C MD</b> <b>2346 DREW ST</b> <b>CLEARWATER, FL 33765</b>	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>President P</b> <b>Glynis Wallace</b> <b>2370 Drew St St A</b> <b>Clearwater, FL 33765</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>S</b> <b>Debbie Evans</b> <b>2358 Drew St</b> <b>Clearwater FL 33765</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>T</b> <b>Dr Rajendra Rai</b> <b>2370 Drew St St B</b> <b>Clearwater, FL 33765</b>	<input type="checkbox"/> Change <input checked="" 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		
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><i>Glynis Wallace</i></u> <b>Glynis Wallace</b>			<b>4/28/08</b> <b>727-726-7400</b> <small>Date Daytime Phone #</small>		