

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 12, 2007
Secretary of State**

DOCUMENT# N04000001844

Entity Name: SKY TOP PROFESSIONAL PLAZA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2180 WEST ST RD 434
SUITE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

Current Mailing Address:

2180 WEST ST RD 434
SUITE 5000
LONGWOOD, FL 327795044

New Mailing Address:

FEI Number: 20-1684708 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT INC
2180 WEST SR 434 SUITE 5000
LONGWOOD, FL 327795044 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: VPD () Delete
Name: RAY, JAMES
Address: 1101 CITRUS TOWER BLVD
City-St-Zip: CLERMONT, FL 34711

Title: PD () Delete
Name: ENDICOTT, JOHN
Address: 251 MAITLAND AVE STE 215
City-St-Zip: MAITLAND, FL 32701

Title: STD () Delete
Name: RUSSO, JAMES
Address: 5333 SW 75TH ST BB-160
City-St-Zip: GAINESVILLE, FL 32608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: STD (X) Change () Addition
Name: RUSSO, JAMES
Address: 3764 GLENFORD DR
City-St-Zip: CLERMONT, FL 34711

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: JOHN ENDICOTT

PD

04/12/2007

Electronic Signature of Signing Officer or Director

Date