


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 27, 2006 8:00 am**  
**Secretary of State**

04-27-2006 90147 050 \*\*\*\*61.25

<b>DOCUMENT # N04000002329</b>	
<b>1. Entity Name</b> 2020 PROFESSIONAL CENTER CONDOMINIUM ASSOCIATION, INC.	

<b>Principal Place of Business</b> 4306 BARRACUDA DRIVE BRADENTON FL 34208	<b>Mailing Address</b> 4306 BARRACUDA DRIVE BRADENTON FL 34208
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<b>2. Principal Place of Business</b> 2020 Cattleman Rd Suite, Apt. #, etc. Ste 500 City & State Sarasota FL Zip 34232 Country USA	<b>3. Mailing Address</b> 2020 Cattleman Rd Suite, Apt. #, etc. Ste 500 City & State Sarasota FL Zip 34232 Country USA
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1st MOORE CR2E037 (10/05)

<b>6. Name and Address of Current Registered Agent</b> BREEDEN, GEORGE R 4306 BARRACUDA DRIVE BRADENTON FL 34208	<b>7. Name and Address of New Registered Agent</b> Name TOOTH MORGAN Street Address (P.O. Box Number is Not Acceptable) 2020 Cattleman Rd Ste 500 City Sarasota FL Zip Code 34232
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<b>4. FEI Number</b> 20-2382610	<b>Applied For</b> <input type="checkbox"/> Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</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** George R. Breeden **DATE** 4/15/06  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW: FEE IS \$61.25</b> <b>Due By May 1, 2006</b>	<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	<b>Make Check Payable to</b> <b>Florida Department of State</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
<b>TITLE</b> P <b>NAME</b> BREEDEN, GEORGE R <b>STREET ADDRESS</b> 4306 BARRACUDA DRIVE <b>CITY - ST - ZIP</b> BRADENTON FL 34208	<input checked="" type="checkbox"/> Delete	<b>TITLE</b> P <b>NAME</b> TOOTH MORGAN <b>STREET ADDRESS</b> 2020 Cattleman Rd Ste 500 <b>CITY - ST - ZIP</b> Sarasota FL 34232	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> VP <b>NAME</b> FEATHERMAN, DONALD S MD <b>STREET ADDRESS</b> 943 BENEVA RD. SOUTH <b>CITY - ST - ZIP</b> SARASOTA FL 34232	<input type="checkbox"/> Delete	<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY - ST - ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> SEC. <b>NAME</b> MINELLA, JANET L MD <b>STREET ADDRESS</b> 4306 BARRACUDA DRIVE <b>CITY - ST - ZIP</b> BRADENTON FL 34208	<input checked="" type="checkbox"/> Delete	<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY - ST - ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY - ST - ZIP</b>	<input type="checkbox"/> Delete	<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY - ST - ZIP</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY - ST - ZIP</b>	<input type="checkbox"/> Delete	<b>TITLE</b>  <b>NAME</b>  <b>STREET ADDRESS</b>  <b>CITY - ST - ZIP</b>	<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 Section 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:** Tooth Morgan **DATE:** 3/8/06 **FILE NUMBER:** 991 378 3937