2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

May 01, 2007 8:00 am Secretary of State DOCUMENT # N05000010695 05-01-2007 90022 020 ****61.25 1. Entity Name ONE HUNDRED CENTRAL CONDOMINIUM ASSOCIATION, INC. 40022101 Principal Place of Business Mailing Address PROGRESSIVE COMMUNITY MGMT PROGRESSIVE COMMUNITY MGMT 1801 GLENGARY ST 1801 GLENGARY ST SARASOTA, FL 34231 SARASOTA, FL 34231 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01152007 Chg-NP CR2E037 (12/06) 4. FEI Number 20-3714470 City & State City & State Applied For Not Applicable Zio Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PROGRESSIVE COMMUNITY MGMT, INC Street Address (P.O. Box Number is Not Acceptable) 1801 GLENGARY ST SARASOTA, FL 34231 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2007 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. TILE Change TITLE Delete SOUZA ELSIE 100 CENTRAL AVE , B406 BRUSCO, GEORGE NAME NAME 401 N. CATTLEMEN ROAD SUITE 108 STREET ADDRESS STREET ADORESS CITY-ST-ZIP SARASOTA, FL 34232 CITY-ST-21P SARASOTA FL 34236 Delete Change TITLE GOFF ALAN PEARCE, LAWRENCE NAME NAME 100 CENTRAL AVE, # 6713 STREET ADDRESS 372 LENELL ROAD STREET ADDRESS CITY-ST-ZIP FORT MYERS BEACH, FL 33931 CITY-ST-ZIP SARASOTA FL 34236 Delete TILLE TITLE ☐ Change Addition MASSER JEFF 100 CENTRAL AVE, # G513 SARASOTA, FL 34236 KENNELLY, MICHAEL NAME NAME

12. I hereby certify that the information supplied with this filling 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 than the property of the corporation of the corporati

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NAME

401 N. CATTLEMEN ROAD SUITE 108

SARASOTA, FL 34232

MARKEL, JIM

1801 GLENGARY ST

SUTTON, WILLIAM

1801 GLENGARY ST

SARASOTA, FL 34231

SARASOTA, FL 34231

FRANK, ALBIE
100 CENTRAL AVE # H516
SARASOTA FL 34236

FILED

Change

Addition

Addition

■ Addition