

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2007 08:00 AM
Secretary of State

DOCUMENT # N05000011284 1. Entity Name LWR TECHNOLOGY PARK CONDOMINIUM ASSOCIATION, INC.	
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Principal Place of Business 1335 SECOND STREET SARASOTA, FL 34236	Mailing Address 1335 SECOND STREET SARASOTA, FL 34236
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01122007 No Chg-NP CR2E037 (4/06)

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4. FEI Number 20-3856555	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SCH;PTTHAUER, WILLIAM G 200 SOUTH ORANGE AVENUE SARASOTA, FL 34236	DO NOT WRITE IN THIS SPACE
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable</small>	DATE _____ <small>(NOTE: Registered Agent signature required when reinstating)</small>
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Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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U00000648026
03/06/07-80096-007 61.25

10. OFFICERS AND DIRECTORS	
TITLE	PD
NAME	ROSS, RICHARD E
STREET ADDRESS	1335 SECOND STREET
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	VD
NAME	HEMBREE, JOSEPH
STREET ADDRESS	1335 SECOND STREET
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	SD
NAME	ROSE, STEVEN
STREET ADDRESS	1335 SECOND STREET
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE
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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 another like empowered.

SIGNATURE: 	Richard Ross	2-9-07	941-951-1776
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #