2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 17, 2008 8:00 am Secretary of State

1. Entity Nam	MENT # N07000000 CONDOMINIUM ASSOCIAT			. 03-17-2008 90010 028 ****61.25
Principal Plac 505 S. ORAN #100 SARASOTA, F		Mailing Address 505 S. Orange AVE #100 SARASOTA, FL 34236	1	
2. Principal Place of Business - No P.O. Box# 3. Mailing Address PROGRESSIVE COMMUNITY MGMT IN PROGRESSIVE COMMUNITY MGMT IN				
Suite, Apt. 180) (City & Stat	SLENGARY STREET	Suite, Apt. #, etc. 1801 GLENGARY City & State	STREE	
SARAS	OTA +L	SARASOTA	FL	20 · 8 5 0 5 7 9 Not Applicable
342	31 Country USA	34231	Country USA	5. Certificate of Status Desired S8.75 Additional Fee Required
	6. Name and Address of Current R	legistered Agent		7. Name and Address of New Registered Agent
C/O KEVIN	& POLIAKOFF, P.A. NEDWARDS, ESQ. ANGE AVE STE 300 'A, FL 34236		Street A	OGRESSIVE COMMUNITY IVANAGEMENT LING 1 Address (P.O. Box Number is Not Acceptable) O GLENGARY STREET - FLOOR (
S. 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. Lam familiar with and accept				
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 Styristure hyped or printed name of registered agent and Library hyped or printed name of registered agent and Library hyped or printed name of registered agent and Library hyped or printed name of registered agent and Library hyped or printed name of registered agent and Library hyped or printed name of registered agent and Library hyped or printed name of registered agent and Library hyped or printed name of registered agent and Library hyped or printed name of registered agent and Library hyped or printed name of registered agent and Library hyped or printed name of registered agent and Library hyped or printed name of registered agent and Library hyped or printed name of registered agent and Library hyped or printed name of registered agent and Library hyped or printed name of registered agent and Library hyped or printed name of registered agent and Library hyped or printed name of registered agent and Library hyped or printed name of registered agent and Library hyped or printed name of registered agent age				
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campa Trust Fund Conf		\$5.00 May Be Make check payable to Added to Fees Florida Department of State
10.	OFFICERS AND DIRI	ECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP KALTSAS, HARVEY 1837 BUCCANEER DR SARASOTA, FL 34231	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S 515 S. WASHINGTON BLVD. SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV KALTSAS, CYNTHIA 456 AVENIDA DEL MAYO SARASOTA, FL 34242	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST PHILLIPS, ROD 165 SANDY HOOK RD SARASOTA, FL 34242	⊠ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Change Bladdition LEVY DAN 505 SOUTH ORANGE AVE., #801 5ARASOTA FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	BARLOW, RICHARD Change MAddition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS Change MAddition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SUTTON WILLIAM Change Addition

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 like empowered.

SIGNATURE:

Manufacture and typed on Printed Name of Signang Officer on Director

MARKEL .

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