FILED Apr 10, 2008 8:00 am Secretary of State 03-24-2008 90057 023 ****61.25

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2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N07000010371 1. Entity Name AIRPORT PROFESSIONAL CENTRE CONDOMINIUM ASSOCIATION, INC.												
Principal Place of Business Mailing Addr 50 SOUTH U.S. HIGHWAY ONE 50 SOUTH U SUITE 110 SUITE 110 UPITER, FL 33477 JUPITER, FL					H U.S. HIGHWAY ONE O							
Principal Place of Business - No P.O. Box # 3. Mailing Address												
Suite, Apt. #, etc.				Suite, Apt. #, etc.				03112008	Chg-NP	CR2E03	7 (12/06)	
City & State			City & State					4. FEI Number Applied Fo			optied For at Applicable	
Zip	Country		Zip	Žip C		ountry		5. Certificate of S	Status Desired		\$8.75 Add Fee Require	
	6. Name	and Address of Current	Registere	d Agent		Name		7. Name and Ad	dress of New R	egistered A	igent	
LEVIÑE, JAY STEVEN ESQUIRE 3300 PGA BOULEVARD						Street Address (P.O. Box Number is Not Acceptable)						
SUITE 530 PALM BEACH GARDENS, FL 33410											<u> </u>	
						City	-			FL	Zip Cod	9
	named entil	y submits this statement for tered agent.	or the purp	ose of changing its	register	ed office or re	gister	ed agent, or both, is	n the State of Flo	orida. I am f	amiliar with,	and accept
SIGNATURE.										·	<u>.</u>	· · ·
•		or primed name of registered agent	and 100 / 100			ed Agent signature /	-0.00		1	DATE		
Filing Fee is \$61.25 9. Election Campaign F Due by May 1, 2008 Trust Fund Contribut							İ	\$5.00 May Be Added to Fees			payable to ment of S	
10. ·	PD	OFFICERS AND DI	RECTORS		11.		A	DDITIONS/CHANC	GES TO OFFICE	RS AND DIF		
TITLE MAME	SEACH, DAVID R					€					☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP	INTERTADORESS 50 SOUTH U.S. HIGHWAY ONE, SUITE 110 JUPITER, FL 33477					EET ADDRESS /-SI-ZIP						
TITLE NAME STREET ADDRESS	VPD Deleta WHITHAM, RICHARD ADDRESS 50 SOUTH U.S. HIGHWAY ONE, SUITE 110					E NE EFT ADDRESS					☐ Change	Addition
CITY-ST-ZP-	JUPITER	, FL 33477	•	CITY	-SI-ZIP							
NAME - · -	WHITHAI	M, MARJORY		☐ Oelete	HAM	- }				-	Change .	Addition
STREET ADDRESS CITY-ST-ZIP	50 SOUT		EET ADDRESS 1-ST-ZIP									
TITLE ~				☐ Delete	1ITL						Change	· Addition ·
STREET ADDRESS CITY-ST-EP					STRE	EET ADORESS						
TITLE				☐ Delete	TITL						☐ Change	Addition
STREET ADDRESS CITY-ST-ZP					STRE	EET ADORESS (-ST-ZDP			,		••	
TITLE			•	☐ Deleta	โทีน	E -				· :	☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP						EET ADORESS 7-ST-ZIP				- d		
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 ceth; that I am an officer or director of the corporation or the receiver cytrothee 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: 3 -14-08 57.11 (224-5788)												
SIGNAT	UKE: _	BIONOFORE AND TYPED OR	PRINTED NAM	E OF BIGHENG OFFICER	OR PIRECI	TOR		<u>ر د</u>	9-0-a		pome Phone 9	