

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 11, 2008 8:00 am**  
**Secretary of State**

07-11-2008 90016 011 \*\*\*\*61.25

40110289



06122008 Chg-NP CR2E037 (12/06)

<b>DOCUMENT # N07283</b> 1. Entity Name <b>SARNO INDUSTRIAL PARK CONDOMINIUM, INC.</b>					
Principal Place of Business <b>676 WASHBURN RD UNIT 10 MELBOURNE, FL 32534 US</b>			Mailing Address <b>676 WASHBURN RD UNIT 10 MELBOURNE, FL 32534 US</b>		
2. Principal Place of Business - No P.O. Box # <b>SIPC, INC 710 #8 WASHBURN RD</b>		3. Mailing Address <b>710 WASHBURN RD Suite, Apt. #, etc. UNIT #8</b>			
City & State <b>MELBOURNE, FL</b>		City & State <b>MELBOURNE FL</b>		4. FEI Number <b>59-2497811</b>	
Zip <b>32934</b>		Country <b>FLORIDA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>HARPOLD, ROBERT 8527 SHERIDAN RD 11 MELBOURNE, FL 32904</b>				7. Name and Address of New Registered Agent Name <b>JAMES P. BLOCH</b> Street Address (P.O. Box Number is Not Acceptable) <b>710 #8 WASHBURN RD</b> City <b>MELB. FL 32934</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 <u><i>Cheryl J Bloch</i></u> <u><i>Cheryl J Bloch</i></u> <u>7-08-08</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<input checked="" type="checkbox"/> <b>Filing Fee is \$61.25 Due by September 12, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		Make check payable to <b>Florida Department of State</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP HARPOLD, ROBERT 8527 SHERIDAN RD MELBOURNE, FL 32904	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT JAMES P. BLOCH 710 #8 WASHBURN RD MELBOURNE, FL 32934	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARPOLD, GLENN 728 SAMUEL CHASE LANE MELBOURNE, FL 32934	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT MEEKS, JAMES E JR 676 WASHBURN RD, UNIT 10 MELBOURNE, FL	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER CHERYL J BLOCH 710 #8 WASHBURN RD MELBOURNE FL 32934	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLOUSER, JOHN 2723 LAURA BAUGH DR MELBOURNE, FL 32935	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BANDISH, DENNIS 710 WASHBURN RD., UNIT 9 MELBOURNE, FL 32934	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <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 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: <u><i>Cheryl J Bloch</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
<small>Date Daytime Phone #</small>					