

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006716

FILED
Jan 13, 2009
Secretary of State

Entity Name: CAPE PROFESSIONAL CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1216 SW 4TH ST, STE 4
CAPE CORAL, FL 33991

New Principal Place of Business:

Current Mailing Address:

1216 SW 4TH ST, STE 4
CAPE CORAL, FL 33991

New Mailing Address:

FEI Number: 26-2988741

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JANE YEAGER CHEFFY, ESQUIRE
2375 TAMiami TRAIL NORTH
UNIT 310
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D P () Delete
Name: DARBY, STEVEN
Address: 1216 SW 4TH ST, STE 4
City-St-Zip: CAPE CORAL, FL 33991

Title: D VP () Delete
Name: CHERNESKY, THOMAS
Address: 1216 SW 4TH ST, STE 4
City-St-Zip: CAPE CORAL, FL 33991

Title: DST () Delete
Name: PETERSON, ROBERT V
Address: 1216 SW 4TH ST, STE 4
City-St-Zip: CAPE CORAL, FL 33991

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D PT (X) Change () Addition
Name: DARBY, STEVEN L
Address: 1216 SW 4TH ST, STE 4
City-St-Zip: CAPE CORAL, FL 33991

Title: D VP (X) Change () Addition
Name: CHERNESKY, THOMAS
Address: 1216 SW 4TH ST, STE 5
City-St-Zip: CAPE CORAL, FL 33991

Title: D S (X) Change () Addition
Name: PETERSON, ROBERT V
Address: 1216 SW 4TH ST, STE 3
City-St-Zip: CAPE CORAL, FL 33991

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN L. DARBY

D PT

01/13/2009

Electronic Signature of Signing Officer or Director

Date