


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2007 8:00 am
Secretary of State

03-23-2007 90031 024 ****61.25

DOCUMENT # N11882					
1. Entity Name CENTRAL PARKWAY PROFESSIONAL ASSOCIATION, INC.					
Principal Place of Business 901 CENTRAL PKWY STUART, FL 34994 US			Mailing Address PO BOX 6195 STUART, FL 34997 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		02072007 Chg-NP CR2E037 (12/06)	
Zip		Country		4. FEI Number 65-0085431	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
ROBINSOND, CONNIE J 1988 SE MONROE ST STUART, FL 34997			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL Zip Code		
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
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		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	VPD	<input checked="" type="checkbox"/> Delete	TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GALLAGHER, FRANK		NAME	ARTHUR L. LUTES, ARTHUR L.	
STREET ADDRESS	961 CENTRAL PKWY		STREET ADDRESS	911 Central Parkway	
CITY-ST-ZIP	STUART, FL 34997		CITY-ST-ZIP	Stuart FL 34994	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	VP	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MEDER, JOSEPH		NAME	FRANK GALLAGHER	
STREET ADDRESS	963 CENTRAL PKWY		STREET ADDRESS	961 Central Parkway	
CITY-ST-ZIP	STUART, FL 34996		CITY-ST-ZIP	Stuart FL 34994	
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	SECRETARY	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LUTES, ARTHUR L		NAME	MELINDA MEYER	
STREET ADDRESS	909 & 911 CENTRAL PKWY		STREET ADDRESS	955 Central Parkway	
CITY-ST-ZIP	STUART, FL 34996		CITY-ST-ZIP	Stuart FL 34994	
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	TREASURER	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SHAW, STUART		NAME	RICHARD VON FOSSEN	
STREET ADDRESS	959 CENTRAL PKWY		STREET ADDRESS	959 CENTRAL PARKWAY	
CITY-ST-ZIP	STUART, FL 34996		CITY-ST-ZIP	STUART FL 34994	
TITLE		<input type="checkbox"/> Delete	TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	ANITA HILL	
STREET ADDRESS			STREET ADDRESS	933 Central Parkway	
CITY-ST-ZIP			CITY-ST-ZIP	Stuart FL 34994	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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>Arthur L. Lutes</u>		SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date: <u>2/20/2007</u> 772-223-1975	