2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400000717

FILED Apr 08, 2008 Secretary of State

Entity Name: PROFESSIONAL PROPERTIES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

821 EAST OCEAN BLVD. 821 SE OCEAN BLVD. STE A STE A

STUART, FL 34994 STUART, FL 34994

Current Mailing Address: New Mailing Address:

 821 EAST OCEAN BLVD.
 821 SE OCEAN BLVD.

 STE A
 STE A

 STUART, FL 34994
 STUART, FL 34994

FEI Number: 65-0568722 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STRAUSS, SORRELL I
821 EAST OCEAN BLVD.
STE A
STUART, FL 34994 US
STRAUSS, SORRELL I
821 SE OCEAN BLVD.
821 SE OCEAN BLVD.
STE A
STUART, FL 34994 US

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: 04/08/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition Name: STRAUSS, SORRELL I Name: STRAUSS, SORRELL I

 Address:
 821 E. OCEAN BLVD.STE A
 Address:
 821 SE OCEAN BLVD.STE A

 City-St-Zip:
 STUART, FL 34994
 City-St-Zip:
 STUART, FL 34994

Title: DV () Delete Title: DV (X) Change () Addition Name: BUTLER, JAMES J BUTLER, JAMES J

 Address:
 821 E. OCEAN BLVD.
 Address:
 821 SE OCEAN BLVD. STE B

 City-St-Zip:
 STUART, FL 34994
 City-St-Zip:
 STUART, FL 34994

 Title:
 DST
 () Delete
 Title:
 DST
 (X) Change () Addition

 Name:
 SCHAMBACK, GAIL W
 Name:
 SCHAMBACK, GAIL W

 Address:
 821 E. OCEAN BLVD.
 Address:
 821 SE OCEAN BLVD. STE C

City-St-Zip: STUART, FL 34994 City-St-Zip: STUART, FL 34994

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: SORRELL I. STRAUSS DP 04/08/2008