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May 01 1998 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1998FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N96000005764 (3)

1. Corporation Name

GEORGETOWN PROFESSIONAL OFFICE PARK, SECTION 2,
CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

101 E KENNEDY STE 2500
SHUMAKER LOOP & KENDRICK BARNETT PLAZA
TAMPA FL 33602101 E KENNEDY STE 2500
SHUMAKER LOOP & KENDRICK BARNETT PLAZA
TAMPA FL 33602

3. Date Incorporated or Qualified

11/12/1996

4. FEI Number

58-2385797

Applied For

APPLIED FOR

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 101 E. Kennedy Blvd.

26 101 E. Kennedy Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 2800

27 2800

City & State

City & State

23 Tampa, FL

28 Tampa, FL

Zip

Country

24 33602

25 Hillsborough

Zip

Country

29 33602

30 Hillsborough

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DAMONE, MICHAEL G
101 E KENNEDY STE 2500
SHUMAKER, LOOP & KENDRICK BARNETT PLAZA
TAMPA FL 33602

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME DAMONE, MICHAEL G
STREET ADDRESS 850 STEPHENSON HWY STE 200
CITY-ST-ZIP TROY MI1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIPTITLE VD
NAME ANDREWS, DANIEL R
STREET ADDRESS 24800 DENSO DRIVE STE 1750
CITY-ST-ZIP SOUTHFIELD MI 480342.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIPTITLE STD
NAME DAMONE, MICHAEL J
STREET ADDRESS 850 STEPHENSON HWY, STE 200
CITY-ST-ZIP TROY MI3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Michael G. Damone

1/8/98 248
583-6020