

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P01000009809

1. Entity Name
47TH AVENUE PROFESSIONAL PARK BUILDING 3
CONDOMINIUM OWNERS' ASSOCIATION, INC.



Principal Place of Business
11635 N.W. 1ST AVENUE
GAINESVILLE, FL 32607

Mailing Address
11635 N.W. 1ST AVENUE
GAINESVILLE, FL 32607

FILED

07 APR 16 AM 8:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BK



03292007 No Chg-P CR2E034 (11/05)

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4. FEI Number
59-3706706

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CURTIS, JOHN M
11635 N.W. 1ST AVENUE
GAINESVILLE, FL 32607

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IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	CURTIS, JOHN M SR.
STREET ADDRESS	11635 N.W. 1ST AVENUE
CITY-ST-ZIP	GAINESVILLE, FL 32607
TITLE	D
NAME	CURTIS, JOHN M JR.
STREET ADDRESS	11635 N.W. 1ST AVENUE
CITY-ST-ZIP	GAINESVILLE, FL 32607
TITLE	D
NAME	CURTIS, RYAN C
STREET ADDRESS	13820 WEST NEWBERRY ROAD, SUITE 300
CITY-ST-ZIP	JONESVILLE, FL 32669
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 607, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John M. Curtis
Director

3/30/2007

Date

352-332-0838

Daytime Phone #