

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M67762

FILED  
Feb 22, 2010  
Secretary of State

**Entity Name:** PREFERRED CONDOMINIUM MANAGEMENT CORPORATION

**Current Principal Place of Business:**

% ARTHUR SKRIVAN  
25730 HICKORY BLVD. #636-C  
BONITA SPRINGS, FL 33923

**New Principal Place of Business:**

**Current Mailing Address:**

% ARTHUR SKRIVAN  
25730 HICKORY BLVD. #636-C  
BONITA SPRINGS, FL 33923

**New Mailing Address:**

FEI Number: 65-0030958

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SKRIVAN, ARTHUR  
25730 HICKORY BLVD.  
#636-C  
BONITA SPRINGS, FL 33923 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SKRIVAN, ARTHUR  
Address: 25730 HICKORY BLVD. #636  
City-St-Zip: BONITA SPRINGS, FL 34134 US

Title: SD  
Name: SKRIVAN, THERESA  
Address: 25730 HICKORY BLVD. #636  
City-St-Zip: BONITA SPRINGS, FL 34134 US

Title: TD  
Name: SKRIVAN, RICK  
Address: 25730 HICKORY BLVD. #636  
City-St-Zip: BONITA SPRINGS, FL 34134 US

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ARTHUR SKRIVAN

PRES

02/22/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date