FILED May 29, 2001 8:00 am § Secretary of State

2001 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # 719742**

5230	81 ST	ST.	NO.	
ST. F	PETER	SBU	RG FL	33709

1. Linuty 14a	and				~ •	O	J 0 - ^	, ,,,,,,
PARAD	DISE SHORES APARTMENTS, I		05-29-2001 90013 041 ****61.25					
Principal Pla	ace of Business	Mailing Address						
5230 81 ST S ST. PETERS	SY. NO. Burg FL 33709)						
							HI I I I I I I I I I I I I I I I I I I	
2. Principal	Place of Business	3. Mailing Address						. BINGI NAMA BINGI ARAK
Suite, Apt	t. #, etc.	Suite, Apt. #, etc.			, D	O NOT WRITE	IN THIS SPACE	E
City & Sta	ate	City & State		4.	FEI Number 59	-1508492		Applied For Not Applicable
Zip Country		Zip	Country	5.	Certificate of Statu		\$8.7	5 Additional
	6. Name and Address of Current F	egistered Agent		7.	Name and Addres	ss of New Rec		equired
		- groto-to-to-to-to-to-to-to-to-to-to-to-to-	Name		Tellio Milo Madio	22 01 11011 1.02	Jistered Agent	
			Street /	Address (P.O.	Box Number is No	t Accentable)		
	BERNARD D		Ollocia		DOX 140/11DCF 13 140	- Acceptable)		
APT-17	ST LANE N							
	ERSBURG FL 33709		City				FL Zi	p Code
8 The above	e named entity submits this statement for	the number of changing its re	cristered office o	v registered a	gent or both in the	e etate of Floric		
SIGNATURE	Signature, typed or printed name of registered agent an	d title if applicable. (NOT: F	Registered Agent signa	ture required when a	reinstating)		DATE	
FILE NOW: FEE IS \$61.25		9. Election Campaigr F Trust Fund Contrib .ti	P 100	\$5.00 Ma Added to Fe				
10.	OFFICERS AND DIRE	CTORS	11.	ADDI	TIONS/CHANGES	TO OFFICERS	AND DIRECTO	
TITLE	PD	☐ Delete	TITLÉ			<u> </u>	□ Ct	nange Addition
NAME	WARD, BERNARD D	•	NAME	ļ				
STREET ADDRESS CITY-ST-ZIP	5227 81ST LANE N APT-17	İ	STREET ADDRESS CITY-ST-ZIP					
TITLE	ST. PETERSBURG FL 33709 TD			VP/T/D			∑ ch	nange
NAME	SELBY, ALBERT J	Delete	TITLE NAME	MCKST	7011, Phyll 81= ST.N	lis am) (A)	ange [_] Addition
STREET ADDRESS	5217 81ST ST N APT 26		STREET ADDRESS	5217	BIE STIN	· Her	Į	
CITY-ST-ZIP	ST PETERSBURG FL 33709		CITY-ST-ZIP		eters burg	3.FC		
TITLE	VPD	⊘ Delete	THILE	YPID	- Peter		X Ch	-
NAME STREET ADDRESS	JACKSON, PHYLLIS 5217 81 ST N APT 1	,	NAME STREET ADDRESS	671110	2157 21	reeT N). PAPIT	14
CITY-ST-ZIP	ST PETERSBURG FL 33709		CITY-ST-ZIP	STPO	kisburg,	PL 3	3709	
TITLE	VPD	Delete	TITLE	1100	<i>.</i>		_ ~	ange 🔀 Addition
NAME	LOPEZ, PETER F	2	NAME	Crosby	J. LAWre	nce ap	r. 19	
STREET ADDRESS	5246 81ST STREET N APT-14		STREET ADDRESS					
CITY-ST-ZIP	ST PETERSBURG FL 33709		CITY-ST-ZIP		ersburg	, TC - 3		
ritle Name	SWEENEY, CATHERINE	Delete	TITLE NAME	VP/D	or James	5 - 6-6	Ch	ange 🔀 Addition
STREET ADDRESS	5247 81ST ST NORTH, APT 23		STREET ADDRESS	5257	SIN THUS	e ni m	1 210	
CITY-ST-ZIP	ST PETERSBURG FL 33709		CITY-ST-ZIP	ST. PG	dersburg	PC	33709	,
TITLE	7			i c			170 AL	
	∤ ATD	Delete	TITLE	2	TO DELLA	306	∭ Ch	ange 🗌 Addition (
NAME STREET ADDRESS	ALVAREZ, ROBERT	Delete	TITLE NAME STREET ADDRESS	Sweene	ey, CHINET 81= ST.	ine N. Ari	, pa th 5. ∂3	ange 🗌 Addition (

ST. Petrsburg ST. PETERSBURG FL 33709 12. 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 report or supplemental report is true and accurate and that rivy 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 is 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 officer like empowered

CITY-ST-ZIP

SIGNATURE:

Title: AS

Addition

Name: Cerrone, Betty Address: 5246 81st St. N. Apt 8 City-ST-Zip: St. Petersburg, FL 33709

Title: AT/D

Change

Name: Alvarez, Robert Address: 5286 81st ST. N. Apt 14 City-ST-Zip: St. Petersburg, FL 33709