

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725878

FILED  
Jan 19, 2006  
Secretary of State

Entity Name: CONCORD VILLAGE SOUTH CONDOMINIUM ASSOCIATION NO. 3, INC.

**Current Principal Place of Business:**

930/970/1020 85TH AVE N  
ST. PETERSBURG, FL 33702 US

**New Principal Place of Business:**

**Current Mailing Address:**

970-85 AVE. NO.  
ST. PETERSBURG, FL 33702 US

**New Mailing Address:**

FEI Number: 59-1676715      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GANCI, VI PD  
970-85 AVENUE NO.  
# 115  
ST, PETERSBURG, FL 33702 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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GANCI, VI  
Address: 970 85TH AVE. N. #115  
City-St-Zip: ST PETERSBURG, FL 33702

Title: VPD ( ) Delete  
Name: RAMOS, DIANE  
Address: 930 85TH AVE. N. #101  
City-St-Zip: ST PETERSBURG, FL 33702

Title: SD ( ) Delete  
Name: GOLDIE, DONNA  
Address: 1020 85TH AVE. N. #121  
City-St-Zip: ST. PETERSBURG, FL 33702

Title: TD ( ) Delete  
Name: KARMAN, BETTY  
Address: 970 85TH AVE. N. #212  
City-St-Zip: ST. PETERSBURG, FL 33702

Title: D ( ) Delete  
Name: WITTE, GLADYS  
Address: 930 85TH AVE. N. #405  
City-St-Zip: ST. PETERSBURG, FL 33702

Title: PD (X) Delete  
Name: GANCI, VI  
Address: 970 85TH AVE. N. #115  
City-St-Zip: ST. PETERSBURG, FL 33702

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

Title: PD (X) Change ( ) Addition  
Name: JONES, PHYLLIS  
Address: 1020 85TH AVE. N. #118  
City-St-Zip: ST PETERSBURG, FL 33702

Title: VPD (X) Change ( ) Addition  
Name: GANCI, VI  
Address: 970 85TH AVE. N. #115  
City-St-Zip: ST PETERSBURG, FL 33702

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: VI GANCI

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

VPD

01/19/2006

\_\_\_\_\_  
Date