
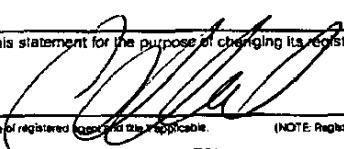
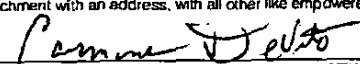


03-22-2004 90050 043 ****61.25

**2004 NOT-FOR-PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # 744480					
1. Entity Name STARBOARD TOWER, CLIPPER COVE CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 400 ISLAND WAY CLEARWATER, FL 33767			Mailing Address 400 ISLAND WAY CLEARWATER, FL 34630		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
Country		Country		Country	
4. FEI Number 59-1852193				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GREENACRE PROPERTIES 4131 GUNN HWY. TAMPA, FL 33624			7. Name and Address of New Registered Agent Name CARLTON WARD, P.A. Street Address (P.O. Box Number is Not Acceptable) 1253 PARK STREET City CLEARWATER FL Zip Code 33756		
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 		DATE 4/2/04			
Filing Fee is \$81.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE P	BAGAN, LAURENCE 400 ISLAND WAY #301 CLEARWATER, FL 33767 <input checked="" type="checkbox"/> Delete		TITLE President	Devito, Carmine Pres. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 400 Island Way, Unit #104 Clearwater, FL 33767	
TITLE VP	SCOPIIS, JOHN 400 ISLAND WAY #1107 CLEARWATER, FL 33767 <input checked="" type="checkbox"/> Delete		TITLE Vice President	Robbins, Robert, Jr <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 400 Island Way Unit 403 Clearwater, FL 33767	
TITLE S	PETERS, JIM 400 ISLAND WAY #1205 CLEARWATER, FL 33767 <input checked="" type="checkbox"/> Delete		TITLE Secretary	Shaw, LeRoy (Chick) Sec <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 400 Island Way Unit #1701 Clearwater, FL 33767	
TITLE T	SHAW, LEROY 400 ISLAND WAY #1701 CLEARWATER, FL 33767 <input checked="" type="checkbox"/> Delete		TITLE Treasurer	Lignell, Sue Treas <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 400 Island Way Unit #1407 Clearwater, FL 33767	
TITLE D	NOVAK, JOHN 400 ISLAND WAY #1605 CLEARWATER, FL 33767 <input checked="" type="checkbox"/> Delete		TITLE Director	Brunner, Pat Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 400 Island Way #1512 Clearwater, FL 33767	
TITLE D	POULOS, PETER 400 ISLAND WAY #1412 CLEARWATER, FL 33767 <input checked="" type="checkbox"/> Delete		TITLE Director	Webster, David <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 400 Island Way Unit #712 Clearwater, FL 33767	
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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 		Carmine DeVito		3/17/04 727-446-6014	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Day/Time Phone #	