## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## DOCUMENT # 745055

1. Entity Name

## PATIO CONDOMINIUM 1 ASSOCIATION, INC.



04-05-2005 90048 016 \*\*\*\*61.25

**FILED** 

Apr 05, 2005 8:00 am Secretary of State

Principal Place of Busine	SS	Mailing Address				
% INFINITI PROPERTY 1301 SEMINOLE BLVD LARGO FL 33770 US	MANAGEMENT, INC. )., STE. 110	% INFINITI PROPERTY MANAGEMENT, INC. 1301 SEMINOLE BLVD., STE. 110 LARGO FL 33770 US				
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.				
City & State		City & State				
Zip	Country	Zip	Country			
6 Name and Address of Current Registered Agent						

	8 8   <b>  </b>	

1st MOORE

CR2E037 (10/04)

0:0.0:		07. 10.						plied For	
City & State C		City & State	y & State		4. FEI Number	4. FEI Number 59-1977421			
7:	0	7:_	1 0-					t Applicable	
Ζip	Country	Zip	p Country		5. Certificate of S	5. Certificate of Status Desired			
	6. Name and Address of Current	Registered Agent	- '	7. Name and Address of New Registered Agent					
and the second s			Name .						
INFINITI PROPERTY MANAGEMENT, INC.		Street Address (P.O. Box Number is Not Acceptable)							
1301 SEMINOLE BLD. SUITE 110				Sileet Address (F.O. Dox Admiber is Not Acceptable)					
LARGO FL 33770				City			Zip Code		
	•			City		FL	Zip Cou	<del>U</del> ;	
	named entity submits this statement for	or the purpose of changing	its register	ed office or reg	gistered agent, or both, in	the State of Florida. I am f	amiliar with,	and accept	
the obligat	ions of registered agent.			•					
CIONATION	.*								
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable (N	OTE Registere	ed Agent signature re	(gnilaizne) nerw berupe	DATE			
20 N 610 4 7	8 - 3 INWANAKS WARE 672 02	835. Jay				S-50-30-30-30-30-30-30-30-30-30-30-30-30-30	250 VY.	13, 38 Sec.	
FILE NOW: FEE IS \$61 25 9. Election Campaign Fi			Financing	\$5.00 May Be	Make Check	Pavable			
	Due By May 1, 2005	9 (NON) 2	d Contribut	~ —	Added to Fees	Florida Depart			
10.	OFFICERS AND DI	RECTORS	11.			ES TO OFFICERS AND DIF	ECTORS IN	10	
TITLE	VD	Delete	TIŦL	E	V/D		☐ Change	Addition	
NAME	GROGAN, KLINE		NAM	Œ	PAPPO, ALICE		<del>-</del>		
STREET ADDRESS	2231-D LARK CIRCLE EAST		STRE	EET ADDRESS	2275-F LARK C	IRCLE E.			
CITY-ST-ZIP	PALM HARBOR FL 34684		CITY	'-ST-ZIP	PALM HARBOR,			,	
TITLE	D	☐ Delete	TITLI	E			☐ Change	☐ Addition	
NAME	GLEBA, DOROTHY		NAM	1E			_ •		
STREET ADDRESS	2225-B LARK CIRCLE WEST		STRE	ET ADDRESS					
CITY-ST-ZIP	PALM HARBOR FL 34684		CITY	'-ST-ZIP					
TITLE	PD	Delete	TITLE	E			☐ Change	Addition	
NAME	TIDWELL, CAROL		NAM	ΙĒ					
	2290-D LARK CIRCLE WEST	•	STRE	ET ADDRESS					
CITY-ST-ZIP	PALM HARBOR FL 34684		CITY	'-ST-ZIP					
TITLE	TD	☐ Delete	TITL	E	•		☐ Change	☐ Addition	
NAME	COOGAN, JOSEPH		NAM	IE .					
STREET ADDRESS	22909-C LARK CIRCLE EAST		STRE	ET ADDRESS					
CITY-ST-ZIP	PALM HARBOR FL 34684		CITY	-ST-ZIP					
TITLE	SD	☐ Delete	TITLE	E			☐ Change	☐ Addition	
NAME	SAMPLES, CAROL		NAM	Æ					
STREET ADDRESS	2237-A LARK CIRCLE WEST		STRE	ET ADDRESS					
CITY-ST-7IP	PALM HARBOR FL 34684		CITY	-ST-ZIP					
TITLE		☐ Delete	TITLE	E			☐ Change	Addition	
NAME			NAM	E					
STREET ADDRESS			STRE	ET ADDRESS					
CITY-ST-ZIP			CITY	-ST-ZIP					
12. I hereby c	ertify that the information supplied with on this report or supplemental report is	this filing does not qualify true and accurate and tha	for the exe	mption stated i	in Section 119.07(3)(i), Flo	orida Statutes. I further cert	ify that the in	formation or director	

72. I hereby certify that the information supplied with this filing does not quality 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Just Dayling Proper of Dayling Proper of