2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007 8:00 am
Secretary of State
04-26-2007 90214 018 ****61.25

DOCUMENT # 748846

1. Entity Name
CORDOVA GREENS V CONDOMINIUM ASSOCIATION,INC.

Principal Place of Business	Mailing Address
2435 US HWY 19 STE 270 HOLIDAY, FL 34691 US	2435 US HWY 19 STE 270 HOLIDAY, FL 34691 US

01032007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1976038 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ULM, JEFFREY C/O GOLDSTAR MANAGEMENT CO INC 2435 US 19 STE 270 HOLIDAY, FL 34691	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARRON, FRANCHIE 8799 BARDMOOR BLVD., #104 LARGO, FL 33777	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CLAUDIA FULLER 8765 BARDMOOR BLVD #F 105 LARGO, FL 33777	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P VAN DYKE, SUSAN 8749 BARDMOOR BLVD #205 LARGO, FL 33777	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP JOHN DOYLE 8799 BARDMOOR BLVD G#101 LARGO, FL 33777	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T DIGIOVONNI, LAURENCE 8765 BARDMOOR BLVD #307 LARGO, FL 33777	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ~~RICHARD PURCARO~~ R	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S PRICE, JUDY 8799 BARDMOOR BLVD #G-203 LARGO, FL 33777	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T RICHARD PURCARO 2667 SAGAL SPRINGS DR #101 CLEARWATER, FL. 33761	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP PLANTAMURA, PATRICIA 10013 118 WAY N SEMINOLE, FL 33772	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Lauren S DeJoy 4/16/07 727 5107913
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #