

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 771172

FILED
Apr 05, 2006
Secretary of State

Entity Name: MAIDSTONE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

New Principal Place of Business:

Current Mailing Address:

4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

New Mailing Address:

FEI Number: 59-2145759

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REARDON, MAUREEN C
4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 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: SHEPHERD, JANE
Address: 10606 LONGWOOD DR #B203
City-St-Zip: LARGO, FL 33777

Title: TD () Delete
Name: GEORGE, DENNIS
Address: 141 LITCHFIELD AVE
City-St-Zip: BABYLON, NY 11702

Title: D () Delete
Name: ERNO, RICH
Address: 8707 BARDMOOR PLACE #C203
City-St-Zip: LARGO, FL 33777

Title: SD () Delete
Name: ROBBINS, DELORES
Address: 8747 BARDMOOR PLACE, #F104
City-St-Zip: LARGO, FL 33777

Title: VPD () Delete
Name: SAHMS, FRANK
Address: 10626 LONGWOOD DR, A103
City-St-Zip: LARGO, FL 33777

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SHEPHERD, JANE
Address: 10606 LONGWOOD DR #B203
City-St-Zip: LARGO, FL 33777

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

Title: VPD (X) Change () Addition
Name: ERNO, RICH
Address: 8707 BARDMOOR PLACE #C203
City-St-Zip: LARGO, FL 33777

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

Title: PD (X) Change () Addition
Name: SAHMS, FRANK
Address: 10626 LONGWOOD DR, A103
City-St-Zip: LARGO, FL 33777

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: FRANK SAHMS

PD

04/05/2006

Electronic Signature of Signing Officer or Director

Date