

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # NO1152 (0)

1. Corporation Name

El Pasado Condominium Association, Inc.

Principal Place of Business

Mailing Address

C/O Seaboard Arbors Management Services, Inc.  
1700 McMullen Booth Road, Suite C-3 SAME  
Clearwater, Florida 34619

3. Date Incorporated or Qualified  
01/30/1984

3a. Date of Last Report  
02/25/1994

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc. 4. FEI Number 59-2426869

Applied For  
Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

23 Zip Country

28 Zip

Country

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

24 Zip Country

29 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Lennard A. Leighton  
C/O Seaboard Arbors Management Services, Inc.  
1700 McMullen Booth Road, Suite C-3  
Clearwater, Florida 34619

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP  
NAME Leonard Stone  
STREET ADDRESS 1801 East Lake Road, 6F  
CITY-ST-ZIP Palm Harbor, FL 34685

TITLE DVP  
NAME Herbert Singer  
STREET ADDRESS 1801 East Lake Road, 11 C  
CITY-ST-ZIP Palm Harbor, FL 34685

TITLE D  
NAME Eleanor Gardner  
STREET ADDRESS 1801 East Lake Road, 21 B  
CITY-ST-ZIP Palm Harbor, FL 34685

TITLE D  
NAME Richard Paluch  
STREET ADDRESS 1801 East Lake Road, 18 D  
CITY-ST-ZIP Palm Harbor, FL 34685

TITLE D  
NAME Federico Leon  
STREET ADDRESS 1801 East Lake Road, 7G  
CITY-ST-ZIP Palm Harbor, FL 34685

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

900001852383  
-06/05/96--01093--017  
\*\*\*61.25

02 51.96

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)