2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # N03000007457

1. Entity Name
ALCAZAR CONDOMINIUM ASSOCIATION, INC.

FILED
05 SEP 20 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
T. Roberts SEP 21 2005

Principal Place of Business	Mailing Address
3808 W. SAN NICHOLAS STREET TAMPA, FL 33629	3808 W. SAN NICHOLAS STREET TAMPA, FL 33629

08112005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
3025 Grovewood Court	3025 Grovewood Court
Suite, Apt. #, etc.: Box 7	Suite, Apt. #, etc.: Box 7
City & State: Tampa, Florida	City & State: Tampa, Florida
Zip: 33629-8895 Country: Hillsborough	Zip: 33629-8895 Country: Hillsborough

4. FEI Number 54-2104593 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

LUETGERT, M D
3808 W. SAN NIEHOLAS
TAMPA, FL 33629

7. Name and Address of New Registered Agent

Name: David Osterweil
Street Address (P.O. Box Number is Not Acceptable): 3025 Grovewood Court Box 7
City: Tampa FL Zip Code: 33629-8895

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: [signature] 8/22/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is $61.25

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	DVP CARTER, STEVEN R 3420 TACON STREET TAMPA, FL 33629	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President David Osterweil 3025 Grovewood Ct. Unit A Tampa, FL 33629	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PST LUETGERT, M.D. 6512 S. BAYSHORE BLVD TAMPA, FL 33611	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Kristin Serafin P.O. Box 716 Tampa, FL 33601	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Jill Reeves 3025 Grovewood ct. Unit D Tampa, FL 33629	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Common Area Maintenance Director Kevin Reeves 3025 Grovewood Ct. Unit D Tampa, FL 33629	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	900059771879 09/20/05--01012--010 **70.00	☐ 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 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] 8/22/05 813-282-1225
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #