

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jun 03, 2005  
Secretary of State**

DOCUMENT# N04000003978

Entity Name: 2203 AVENUE C CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

2203 AVENUE C  
BRADENTON BEACH, FL 342172259

**New Principal Place of Business:**

**Current Mailing Address:**

2203 AVENUE C  
BRADENTON BEACH, FL 342172259

**New Mailing Address:**

FEI Number: 20-1032643      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

FERNANDEZ, KRISTOPHER E  
307 S BLVD  
TAMPA, FL 33606      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: D      ( ) Delete  
Name: WOODS, ARTHUR JR  
Address: 5824 ROSE LN  
City-St-Zip: TAMPA, FL 336193840

Title: STD      ( ) Delete  
Name: FERNANDEZ, KRISTOPHER E  
Address: 307 SOUTH BLVD, STE D  
City-St-Zip: TAMPA, FL 33606

Title: VPD      ( ) Delete  
Name: WOODS, PASON  
Address: 5824 ROSE LN  
City-St-Zip: TAMPA, FL 336193840

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ARTHUR WOODS JR.

D

06/03/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date