

NO4448

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

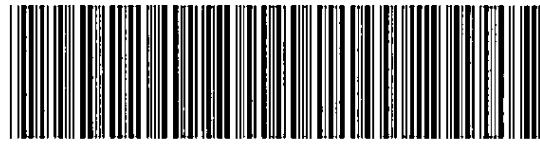
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800368355468

WILLIAM BARBER
WILLIAM BARNETT
CHARLES CLEMENTS
JOHN COOPER
JONAH COOK
WALTER AND GENEVA CO
WALTER AND GENEVA CO
ROBERT W. HENDERSON JR.
ROBERT W. HENDERSON JR.
ROGER E. HOWARD
GEORGE R. HOWARD
GEORGE R. HOWARD
G. DONALD MARTIN

GREENE & MASTRY, P.A.

ATTORNEY GENERAL

SUITE 1500
FLORIDA FEDERAL TOWER
ONE - FOURTH STREET SOUTH
POST OFFICE BOX 3342
ST. PETERSBURG, FLORIDA 33731
(813) 869-2121

WHITE'S DIRECT NUMBER

893-1918

July 26, 1984

NO4448

Corporate Records Bureau
Division of Corporations
Department of State
Post Office Box 6327
Tallahassee, FL 32301

RE: Plaza Villas I Condominium Association, Inc.

Dear Sir:

Enclosed are the original and two copies of the Articles of Incorporation of the above-referenced corporation not for profit for filing. Please return a certified copy to the undersigned. A check in the amount of \$43.00 is enclosed for filing fee, certified copy fee, charter tax, and certificate of registered agent.

Thank you for your attention to this matter.

Very truly yours,

Linda A. Earle

Linda A. Earle

LAE/rh

Enclosures

...-275-2A

1-31-81
Hilt
Hilt
Hilt
Hilt
Hilt

C. TAX 50.00
IPM 3.00
R. T. F. 10.00
RH4 43.00

ARTICLES OF INCORPORATION
OF
PLAZA VILLAS I CONDOMINIUM ASSOCIATION, INC.

We, the undersigned, with other persons being desirous of forming a corporation not for profit under the provisions of Chapter 617 of the Florida Statutes, do agree to the following:

ARTICLE I. NAME

The name of this corporation shall be PLAZA VILLAS I CONDOMINIUM ASSOCIATION, INC, hereinafter referred to as the Association.

ARTICLE II. PURPOSE

The Association is organized as a corporation not for profit under the terms and provisions of Chapter 617 of the Florida Statutes, and is a condominium association, as referred to and authorized by Section 718.111 of the Florida Statutes. The specific purposes for which the Association is organized are to provide an entity responsible for:

(a) the operation of one or more condominiums in Pinellas County, Florida, to be developed by LLOYD E. WILLIAMS, JR., J. K. FINANCIAL CORPORATION, a Florida corporation, and ROBERT D. CRISP, all doing business as PLACIDO BAYOU JOINT VENTURE, hereinafter collectively referred to as Developer.

(b) the ownership, operation, maintenance, repair and administration of certain real property and improvements and facilities thereon, for the use and benefit of all owners of such condominiums.

The Association shall initially be responsible for the operation of PLAZA VILLAS ONE, A CONDOMINIUM. The Association shall also operate one or more condominiums which may be developed on adjacent property, provided the respective Dec-

loration of Condominium of each such condominium designates the Association as the corporate entity responsible for its operation and the Association evidences its acceptance of such responsibilities by written joinder to said Declaration. Each condominium operated by the Association shall hereinafter be referred to as the Condominium. Each Declaration of Condominium, and any amendments thereto, whereby a Condominium has been or will be created, is hereafter referred to as the Declaration.

The foregoing paragraph enumerates the specific purposes of the Association, but it is expressly provided hereby that such enumeration shall not be held to limit or restrict in any manner the purposes or powers of the Association otherwise permitted by law.

ARTICLE III. POWERS AND DUTIES

Section 1. The Association shall have all of the common law and statutory powers of a corporation not for profit which are not in conflict with each respective Declaration and Chapter 718 of the Florida Statutes, hereinafter referred to as the Condominium Act.

Section 2. The Association shall have all of the powers and duties set forth in the Condominium Act, as lawfully modified by these Articles of Incorporation, the Bylaws of the Association or the respective Declaration.

ARTICLE IV. LIMITATIONS ON ACTIVITIES

No part of the net earnings of the Association shall inure to the benefit of, or be distributable to, any member, director or officer of the Association; provided, however, the Association may pay compensation in a reasonable amount for services rendered, may confer benefits on its members in conformity with its purposes, and may make rebates of excess membership dues, fees or assessments. The amount of earnings, if

any, is not to be taken into account in any manner for the purpose of determining whether there should be a rebate or the amount of any rebate.

ARTICLE V. TERM OF EXISTENCE

The Association shall have perpetual existence, unless dissolved according to law, commencing on July 25th, 1984.

ARTICLE VI. MEMBERS

Every owner of a vested present fee simple interest in a Condominium unit shall become a member of the Association; provided, however, in the event of termination of the Condominium, members shall be those persons or other legal entities who are members at the time of such termination, their successors and assigns. The members or members from each Condominium unit shall promptly deliver to the Association a copy of the duly recorded deed or other instrument establishing his title to said Condominium unit and shall obtain a written acknowledgement of said delivery signed by an officer of the Association. Membership in the Association shall be terminated automatically when title to the Condominium unit supporting said membership vests in another legal entity; provided, however, any member who owns more than one (1) unit shall remain a member of the Association so long as he shall retain title to any unit.

Prior to the recording of a Declaration in the Public Records of Pinellas County, Florida, the incorporators shall constitute the membership of the Association and shall each be entitled to one vote.

ARTICLE VII. BOARD OF DIRECTORS

Section 1. The business affairs of this Association shall be managed by the Board of Directors.

Section 2. This Association shall have three (3) directors initially who are to serve as directors until the first election by the members. The names and addresses of the initial directors are as follows:

| <u>NAME</u> | <u>ADDRESS</u> |
|-------------------|---|
| Lloyd E. Williams | 9210 Fourth Street North St. Petersburg, Florida 33702 |
| Robert P. Crisp | 3401 Fourth Street North St. Petersburg, Florida 33704 |
| John E. Kearney | One Plaza Place N.E. St. Petersburg, Florida 33701 |

Section 3. The number of directors may be changed from time to time as provided by the Bylaws, but their number shall never be less than three (3).

Section 4. The first election of directors shall not be held until unit owners other than Developer are entitled to elect at least one (1) director. Any vacancies in the Board occurring before the first election may be filled by Developer.

Section 5. Subsequent to the first election of directors, directors entitled to be elected by unit owners other than Developer shall be elected at the annual meeting of the members and shall be qualified and hold office as provided in the Bylaws. Until Developer transfers control of the Association to the other unit owners, Developer shall be entitled to appoint and remove all directors excepting those entitled to be elected by said unit owners. The Bylaws may provide that all or any portion of the directors be elected by the members from each Condominium, and not by the entire membership. The Bylaws may provide that the directors be divided into not more than four (4) classes, as nearly equal in number as possible, whose terms of office shall respectively expire at different times, so long as no term shall continue longer than four (4) years, and at least one-fifth (1/5) in number of the directors shall be elected annually.

SECTION VIII. OFFICERS

Section 1. The officers of the Association shall be a President, one or more Vice Presidents (if determined to be necessary by the Board of Directors), a Secretary and a Treasurer. Such other officers, assistant officers and agents as may be deemed necessary may be elected or appointed from time to time as provided in the Bylaws.

Section 2. The names of the persons who are to serve as officers of the Association until the first annual meeting of the Board of Directors are:

| <u>OFFICE</u> | <u>NAME</u> |
|---------------|------------------------|
| President | Lloyd E. Williams, Jr. |
| Secretary | Robert P. Crisp |
| Treasurer | John E. Kearney |

Section 3. The officers shall be elected at each annual meeting of the Board of Directors or as provided in the Bylaws, and each shall serve until his successor is chosen and qualified, or until his earlier resignation, removal from office or death.

Section 4. The officers shall have such duties, responsibilities, and powers as provided in the Bylaws and the Florida Statutes.

ARTICLE IX. AMENDMENTS

These Articles of Incorporation may be amended as set forth in the Florida Statutes, as amended from time to time.

ARTICLE X. INITIAL REGISTERED OFFICE AND AGENT

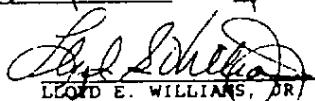
The street address of the initial registered office of this Association is 9210 Fourth Street North, St. Petersburg, Florida 33702, and the name of the initial registered agent of this Association located at that address is Lloyd E. Williams, Jr.

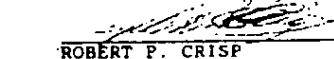
INCORPORATORS

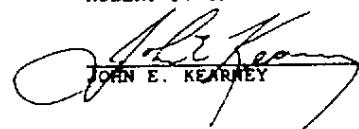
The names and addresses of the incorporators are:

| Name | Address |
|------------------------|---|
| Lloyd E. Williams, Jr. | 9210 Fourth Street North St. Petersburg, Florida 33702 |
| Robert P. Crisp | 3401 Fourth Street North St. Petersburg, Florida 33704 |
| John E. Kearney | One Plaza Place N.E. St. Petersburg, Florida 33701 |

IN WITNESS WHEREOF, for the purpose of forming a corporation not for profit under the provisions of Chapter 617 of the Florida Statutes, the undersigned, constituting the incorporators hereof, have executed these Articles of Incorporation on this 25 day of July, 1984.


LLOYD E. WILLIAMS, JR. (SEAL)


ROBERT P. CRISP (SEAL)


JOHN E. KEARNEY (SEAL)

STATE OF FLORIDA)
COUNTY OF PINELLAS)

The foregoing instrument was acknowledged before me
this 25 day of July, 1984, by LLOYD E. WILLIAMS,
JR.

(SEAL)

My Commission Expires:

Notary Public, State at Large
My Commission Expires Oct. 5, 1985
Bonded thru Jedsco Insurance Agency

Folio

STATE OF FLORIDA)
COUNTY OF PINELLAS)

The foregoing instrument was acknowledged before me
this 25 day of October, 1984, by JOHN E. KEARNEY.

Lloyd E. Williams
Notary Public

(SEAL)

My Commission Expires: Notary Public, Florida State of Large
My Commission Expires Oct. 5, 1985
Bonded thru Jelco Insurance Agency

STATE OF FLORIDA)
COUNTY OF PINELLAS)

The foregoing instrument was acknowledged before me
this 25 day of October, 1984, by ROBERT P. CRISP.

Lloyd E. Williams
Notary Public

(SEAL)

My Commission Expires: Notary Public, Florida, State of Large
My Commission Expires Oct. 5, 1985
Bonded thru Jelco Insurance Agency

ACCEPTANCE

I hereby accept to act as initial Registered Agent
for Plaza Villas I Condominium Association, Inc., as stated in
these Articles of Incorporation.

Lloyd E. Williams, Jr.
Lloyd E. Williams, Jr.
(SEAL)

Notary Public
State of Florida
Lloyd E. Williams, Jr.
Commission No. 100-100000000000000000
Expiring Oct. 5, 1985
Jelco Insurance Agency
BONDED BY JELCO INSURANCE AGENCY

90 DAY NOTICE OF INTENT TO DISSOLVE

CORPORATION
ANNUAL REPORT
1985



FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

105 AUG - 5 AM 1985

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of \$20 Required — Make Checks Payable To: Secretary of State

SE

1 Name and Address of Corporation Principal Office

NO4448
PLAZA VILLAS I CONDOMINIUM ASSOCIATION, IN
LLOYD E. WILLIAMS, JR.
9210 FOURTH STREET NORTH
ST PETERSBURG, FL 33702

2 Street Address or Post Office Box Number of Corporation Principal
Office, P.O. Box Number Only is NOT Sufficient.

3 Great Address

4 PO Box No.

5 City and State

6 Zip Code

If above address is incorrect in any way, enter the correct address
in item 2. Include Zip Code

7 Date Incorporated or Qualified **07/31/1984** 8 Federal Employer Identification Number (FEIN) **59-2454545** 9 Date of Last Report

Names and Street Addresses of Each Officer and Director as of December 31, 1984

| Name of Officers and Directors | Title | Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) | City, State and Zip Code |
|--------------------------------|-------|---|--------------------------|
| WILLIAMS, LLOYD E. | P/D | 9210 FOURTH STREET NORTH | ST PETERSBURG, FL |
| CRISP, ROBERT P. | S/D | 3401 FOURTH STREET NORTH | ST PETERSBURG, FL |
| KEARNEY, JOHN E. | T/D | ONE PLAZA PLACE NE | ST PETERSBURG, FL |

Registered Agent Information

| 7 Name and Address of Current Registered Agent | 8 Name and Address of New Registered Agent |
|--|---|
| WILLIAMS, LLOYD E., JR. 9210 FOURTH STREET NORTH ST PETERSBURG, FL 33702 | Name <input type="checkbox"/> Street Address (Do NOT Use P O Box Number) <input type="checkbox"/> City and State <input type="checkbox"/> Zip Code <input type="checkbox"/> |

9 Pursuant to the provisions of Sections 607.024 and 607.027, Florida Statutes, the above-named corporation, organized under the laws of the State of Florida, 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 resolution duly adopted by its Board of Directors on _____

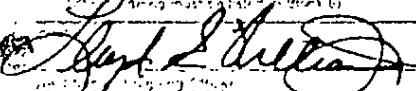
I hereby certify the Department of Registered Agent, I am familiar with, and accept the obligations of, Section 607.025 F.S.

Signature (Registered Agent Accepting Appointment) Date

\$3.00 additional fee required for Registered Agent changes.

10 Signature Referring to the instructions on reverse side of this form

I certify that I Am An Officer of the Corporation, the Register or Trustee Empowered to Execute This Paper as Required by Chapter 607 F.S.
I further certify I understand the signature on this paper shall have the same legal effects as it made under oath
(See Chapter 607 F.S. for definition of Officer)


Lloyd E. Williams, Jr.

President

Date
July 29, 1985

Telephone Number
576-3826

\$5 additional fee required for a Certificate of Status

DUE DATE ON OR AFTER JANUARY 1 DEPOSITION AFTER JULY 1 OF EACH YEAR

INCORPORATION

ANNUAL REPORT
1986



DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of \$20 Required - Make Checks Payable To: Secretary of State

Florida Department of State, P.O. Box 3205, Tallahassee, FL 32301-3205

Enter Change of Address of Corporation, President,
Chairman or General Manager, Vice President, Secretary

NO. 448

9

PLAZA VILLAS I CONDOMINIUM ASSOCIATION, INC.
C. LLOYD E. WILLIAMS, JR.
9210 FOURTH STREET NORTH
ST. PETERSBURG, FL 33702

534 - 47th Avenue NE
FL 33703

City and State 23
St. Petersburg, Florida
Zip Code 24
33703

If above address is incorrect in any way, enter the correct address
in Item 2, include Zip Code

Incorporated or Qualified

07/31/1984

14 Federal Employer's
Identification Number (FEIN)

59-2454545

15 Date of
Last Report

08/05/1985

Business in Florida

16 Name and Street Address of Each Officer and Director, As of December 31, 1984

| Name of Officers and Directors | Title | Street Address of Each Officer and Director (Do Not Use Box Number) | City and State |
|-----------------------------------|-------|---|--------------------|
| WILLIAMS - LLOYD E. | P/D | 8210 FOURTH STREET NORTH | ST. PETERSBURG, FL |
| WALTER I. LARSON | P/D | 534 - 47th Avenue NE | ST. PETERSBURG, FL |
| ROBERT P. | S-D | 3481 FOURTH STREET NORTH | ST. PETERSBURG, FL |
| JEFFREY C. LARSON | V/D | 534 - 47th Avenue NE | ST. PETERSBURG, FL |
| MURRAY - JOHN E. | TAG | ONE PLAZA PLACE NE | ST. PETERSBURG, FL |
| DEENA SCROGGINS | S/T | 534 - 47th Avenue NE | |
| RUSSELL OATHOUT | D | 476B Santa Cruz Place NE | St. Petersburg, FL |

REGISTERED AGENT INFORMATION

17 Name and Address of Current Registered Agent

WILLIAMS, LLOYD E. JR.
9210 FOURTH STREET NORTH
ST. PETERSBURG, FL 33702

18 Name and Address of New Registered Agent

Name in #1

Jeffrey C. Larson

Street Address (DO NOT USE BOX NUMBER)

534 - 47th Avenue NE

City and State #3

St. Petersburg,

Zip Code 21

FL. 33703

I, the undersigned, do hereby certify that the above named corporation, incorporated under the laws of the State of Florida, submits
this report for the purpose of changing its registered office or registered agent or both in the state of Florida.
I further certify that I understand my signature on this report shall have the same legal effects as a written Under Oath
declaration must be later filed in this state.

August 7, 1986

I, by accepting the appointment of registered agent, I am familiar with, and accept the obligations of Section 407.035 F.S.

Signature: *Jeffrey C. Larson*
(Registered Agent Accepting Appointment)

Date 8-7-86

\$3.00 additional fee required for Registered Agent changes.

Signature restrictions under existing law or statute, if any, apply.
I, Jeffrey C. Larson, An Officer of the Corporation, the Receiver or Trustee Employed to File on This Report as Required by Chapter 407 F.S.
certify That I Understand My Signature on This Report Shall Have the Same Legal Effects As a Written Under Oath
Declaration Must Be Later Filed in This State.

Jeffrey C. Larson
Signature

51-81
Date
813/526-8002



| FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987 | | | | | | | | | | | | | | | | | | | | | | | |
|--|-------|--|--------------------|---------------------------------|-------|---|----------------|-------------------|-----|---------------------|-------------------|--------------------|-----|---------------------|-------------------|------------------|-----|---------------------|-------------------|------------------|---|---------------------------|--------------------|
| CORPORATION ANNUAL REPORT 1987 | |  FLORIDA DEPARTMENT OF STATE George Firestone Secretary of State DIVISION OF CORPORATIONS | | | | | | | | | | | | | | | | | | | | | |
| DO NOT WRITE IN THIS SPACE | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Read Notice and Instructions on Other Side Before Making Entries <input type="checkbox"/> Filing Fee of \$25 Required - Make Checks Payable To: Secretary of State | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Name and Address of Corporation Principal Office N044448 PLAZA VILLAS I CONDOMINIUM ASSOCIATION, INC. 2 LLOYD E. WILLIAMS, JR. 534-47TH AVE., N.E. ST PETERSBURG, FL 33703 | | <input type="checkbox"/> Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient C/o WALTER I. LARSON <input type="checkbox"/> Street Address 21 <input type="checkbox"/> P.O. Box No. 22 <input type="checkbox"/> City and State 23 <input type="checkbox"/> Zip Code 24 | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> If above address is incorrect in any way, enter the correct address <input type="checkbox"/> Item 2 includes Zip Code | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Incorporated or Quoted 07/25/1984 <input type="checkbox"/> Do Business in Florida | | <input type="checkbox"/> Federal Employee: Identification Number (FEIN) 59-2454545 | | | | | | | | | | | | | | | | | | | | | |
| | | <input type="checkbox"/> Date of Last Report 08/27/1986 | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Names and Street Addresses of Each Officer and Director, as of December 31, 1985 | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <thead> <tr> <th>Names of Officers and Directors</th> <th>Title</th> <th>Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)</th> <th>City and State</th> </tr> </thead> <tbody> <tr> <td>LARSON, WALTER I.</td> <td>P/D</td> <td>534-47TH AVE., N.E.</td> <td>ST PETERSBURG, FL</td> </tr> <tr> <td>LARSON, JEFFREY C.</td> <td>V/D</td> <td>534-47TH AVE., N.E.</td> <td>ST PETERSBURG, FL</td> </tr> <tr> <td>SCROGGINS, DEENA</td> <td>S/T</td> <td>534-47TH AVE., N.E.</td> <td>ST PETERSBURG, FL</td> </tr> <tr> <td>DATHOUT, RUSSELL</td> <td>O</td> <td>4768 SANTA CRUZ PL., N.E.</td> <td>ST. PETERSBURG, FL</td> </tr> </tbody> </table> | | | | Names of Officers and Directors | Title | Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) | City and State | LARSON, WALTER I. | P/D | 534-47TH AVE., N.E. | ST PETERSBURG, FL | LARSON, JEFFREY C. | V/D | 534-47TH AVE., N.E. | ST PETERSBURG, FL | SCROGGINS, DEENA | S/T | 534-47TH AVE., N.E. | ST PETERSBURG, FL | DATHOUT, RUSSELL | O | 4768 SANTA CRUZ PL., N.E. | ST. PETERSBURG, FL |
| Names of Officers and Directors | Title | Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) | City and State | | | | | | | | | | | | | | | | | | | | |
| LARSON, WALTER I. | P/D | 534-47TH AVE., N.E. | ST PETERSBURG, FL | | | | | | | | | | | | | | | | | | | | |
| LARSON, JEFFREY C. | V/D | 534-47TH AVE., N.E. | ST PETERSBURG, FL | | | | | | | | | | | | | | | | | | | | |
| SCROGGINS, DEENA | S/T | 534-47TH AVE., N.E. | ST PETERSBURG, FL | | | | | | | | | | | | | | | | | | | | |
| DATHOUT, RUSSELL | O | 4768 SANTA CRUZ PL., N.E. | ST. PETERSBURG, FL | | | | | | | | | | | | | | | | | | | | |
| REGISTERED AGENT INFORMATION <input type="checkbox"/> Name and Address of Current Registered Agent LARSON, JEFFREY C. 534-47TH AVE., N.E. ST PETERSBURG, FL 33703 | | <input type="checkbox"/> Name and Address of New Registered Agent <input type="checkbox"/> Name 81 <input type="checkbox"/> Street Address 1 (Do NOT Use P.O. Box Number) 82 <input type="checkbox"/> Street Address 2 (Do NOT Use P.O. Box Number) 83 <input type="checkbox"/> City and State 84 FL. <input type="checkbox"/> Zip Code 88 | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> I attest to the provisions of Sections 607.014 and 607.037, Florida Statues, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office, or registered agent, or both, in the State of Florida. <input type="checkbox"/> That was authorized by resolution duly adopted by the board of directors on _____ <input type="checkbox"/> I acknowledge the appointment of registered agent, I am familiar with, and accept the obligations of, Section 607.325 F.S. | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Signature <u>Jeffrey C. Larson</u> <input type="checkbox"/> Registered Agent Appointing Authority | | <input type="checkbox"/> DATE 6-16-87 | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> \$1.00 additional fee required for Registered Agent changes | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> I attest to the provisions of Sections 607.014 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office, or registered agent, or both, in the State of Florida. <input type="checkbox"/> That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. <input type="checkbox"/> Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath <input type="checkbox"/> Officer Signing must be listed in Block 6) | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Signature <u>Walter I. Larson</u> <input type="checkbox"/> President | | <input type="checkbox"/> Date 6-16-87 <input type="checkbox"/> Telephone Number 526-8092 | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> I attest to the provisions of Sections 607.014 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office, or registered agent, or both, in the State of Florida. <input type="checkbox"/> That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. <input type="checkbox"/> Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath <input type="checkbox"/> Officer Signing must be listed in Block 6) | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Signature <u>Walter I. Larson</u> <input type="checkbox"/> President | | <input type="checkbox"/> Date 6-16-87 <input type="checkbox"/> Telephone Number 526-8092 | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> \$5 Additional Fee required for a Certificate of Status | | | | | | | | | | | | | | | | | | | | | | | |

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT
1988



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

REGISTRATION NO. 1007

AUGUST 27, 1987

STATE

Filing Fee of \$25 Required - Make Checks Payable To: Secretary of State

Print and Address of Corporation File on Other

N0440E

PLAZA VILLAS I CONDOMINIUM ASSOCIATION, INC.
C/O WALTER T. LARSON
534-47TH AVE., N.E.
ST PETERSBURG, FL 33703

Print and Address of Registered Agent With Corporation

Jeffrey C. Larson

2 Enter Name of Agents or Corporation Principal
Office P.O. Box Number Above is 1007 Subagent

Name Address 21

P.O. Box 1007 22

City and State 23

Zip Code 24

| | | | | |
|--------------------------|------------|----------------------------|--|-------------------------------------|
| Printed Name of Director | 07/25/1984 | 4 Private Employer | 5 Registration Number (FEMA) 59-2154545 | 5 Date of Last Action 06/24/1987 |
| C/O WALTER T. LARSON | | 6 Corporation Address | 7 Check if Not Used P.O. Box Number 1007 | 8 City and State |
| 534-47TH AVE., N.E. | | 8 City and State | | |
| ST PETERSBURG, FL 33703 | | | | |
| LARSON, WALTER T. | P/O | 534-47TH AVE., N.E. | ST PETERSBURG, FL | |
| LARSON, JEFFREY C. | V/D | 534-47TH AVE., N.E. | ST PETERSBURG, FL | |
| BERGONIEN, OBENA | S/T | 534-47TH AVE., N.E. | ST PETERSBURG, FL | |
| BAGHOUT, MUSKELL | D | 1740 SANTA CRUZ, FL., N.W. | ST. PETERSBURG, FL. | |
| BLADEFIELD, EDWARD | S/P | 534-47TH AVE., N.E. | | |
| WILCOX, SCOTT H. III | T | | | |

REGISTERED AGENT INFORMATION

Print and Address of Current Registered Agent
LARSON, JEFFREY C.
534-47TH AVE., N.E.
ST PETERSBURG, FL 33703

Print and Address of Registered Agent

Jeffrey C. Larson (DO NOT USE P.O. Box Number 1007)

Same Address 21 DO NOT USE PO Box Number 1007

City and State 22

Zip Code 23

FL

I certify to the best of my knowledge and belief that the above information is true and accurate, and is submitted under the laws of the State of Florida, and as the same have not been altered by me, and is true and accurate to the best of my knowledge and belief. I further certify that I am an Officer or Director of the Corporation or that I am Entitled to Execute This Report as Provided in Chapter 407 F.S.

I further certify that I understand the Statute That It Is Unlawful To Make Any Statement As To The Financial Condition Of A Corporation Excepting One Made Under Oath.

Signature of Registered Agent

6-15-88

Jeffrey C. Larson

Vice President/Director 813-522-6810

\$5 Additional Fee
Required for a
Certificate of Status

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

B-7038NC 8/22/89

CORPORATION



ANNUAL REPORT
1989

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FL

1000 AM 22 AUG 1989

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
1000 AM 22 AUG 1989

Filing Fee of \$35 Required - Make Checks Payable To: Secretary of State

Address of Corporation Principal Office

ZIP + 4

NO4448 9
PLAZA VILLAS I CONDOMINIUM ASSOCIATION, INC.
C/O WALTER I. LARSON
534-47TH AVE., N.E.
ST PETERSBURG, FL 33703-3121

2 Enter Change of Address of Corporation Principal
Office, P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

Address address is incorrect in any way; enter the correct address
in Item 2 above Zip Code

| | | | | | |
|---|---------------------|---|---------------------|--------------------------|---------------------|
| 1 Serial or Control Number | 07/25/1984 | 4 Federal Employer Identification Number (FEIN) | 59-2454545 | 5 Date of Last Report | 06/30/1988 |
| 2 Street Address of Each Officer and Director at of Corporation | 534-47TH AVE., N.E. | 3 Street Address of Each Officer and Director (Do Not Use P.O. Box Numbers) | 534-47TH AVE., N.E. | 4 City and State | ST PETERSBURG, FL |
| P/D LARSON, WALTER I. | 534-47TH AVE., N.E. | V/D LARSON, JEFFREY C. | 534-47TH AVE., N.E. | S/D BIGELOW, EDWARD | ST PETERSBURG, FL |
| T MOOR, JOHN H. III | 534-47TH AVE. N.E. | | | | ST. PETERSBURG, FL. |

REGISTERED AGENT INFORMATION

8 Name and Address of New Registered Agent

LARSON, JEFFREY C.
534-47TH AVE., N.E.
ST PETERSBURG, FL 33703

Street Address / DO NOT USE P.O. Box Number

Street Address 2 (Do Not Use P.O. Box Number)

City and State 84

Zip Code 84

FL

See Chapter 447, Sections 447.014 and 447.021 Florida Statutes. This document was submitted under the laws of the State of Florida. Submission of this document does not constitute an admission by the filer that the filer is subject to the laws of the State of Florida. This document is not a substitute for a certificate of incorporation or a certificate of dissolution. It is a statement of facts concerning the corporation's affairs and is not a copy of a document filed with the Department of State.

John H. Moore
Registered Agent
Accomplished

DATE

See Chapter 447, Sections 447.014 and 447.021 Florida Statutes. This document was submitted under the laws of the State of Florida. Submission of this document does not constitute an admission by the filer that the filer is subject to the laws of the State of Florida. This document is not a substitute for a certificate of incorporation or a certificate of dissolution. It is a statement of facts concerning the corporation's affairs and is not a copy of a document filed with the Department of State.

David Turdve
DAVID TURDVE

PRESIDENT

513-522-6810

ANNUAL REPORT
MAILED TO THE SECRETARY OF STATE
BY CERTIFIED MAIL OR PERSONAL SERVICE

FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST

CORPORATION



ANNUAL REPORT
1990

FLORIDA DEPARTMENT OF STATE
Division of Corporations

Secretary of State
Division of Corporations

Filing Fee of \$35 Required - Make Checks Payable To: Secretary of State

Print Name and Address of Corporation Director or Officer

N04448 9

ZIP + 4 PRESENT
PLAZA VILLAS I CONDOMINIUM ASSOCIATION, INC.
C/O WALTER J. LARSON
534-47TH AVE., N.E.
ST PETERSBURG, FL 33703-3121

Print Name and Address of Post Office Box Number and Zip Code

PO BOX 32
TALLAHASSEE, FL 32330-0032
TALLAHASSEE, FL 32330-0032

PO Box 32
City and State 23
Zip Code 34

If Address in Block 1 is incorrect in any way, enter the correct address
below. PO Box number alone is NOT sufficient. The name
of the corporation can be changed only by filing an amendment.
Street Address 21

| | Date of Incorporation | FEI Number | FEI Number Application Fee Number Paid |
|-------|-----------------------|------------|---|
| P/D | LARSON, WALTER J. | 07/25/1984 | 59-2454545 |
| V/D | PURDUE, DAVID | | |
| S/D | LARSON, JEFFREY C. | | |
| G/D | OATHOUT, ROSS | | |
| V/D | DIAKOW, EDWARD | | |
| S/D | SCHZINS, RAY | | |
| T/S/D | MOOR, JOHN H. III | | |
| R/T/D | KLAFFKE, LINDA | | |
| | BIGELOW, ED | | |

AT Moer, John H. III

REGISTERED AGENT INFORMATION

LARSON, JEFFREY C. /Moer, John H. III
534-47TH AVE., N.E.
ST PETERSBURG, FL 33703

Print Name and Address of Post Office Box Number 32

PO Box 32
City and State 23
Zip Code 34

FL

I, the undersigned, do solemnly swear and affirm that the above information is true and correct to the best of my knowledge and belief, and that the State of Florida, its officers, agents, and employees shall have the same at their expense, examined and used for no other purpose than the purpose for which it was furnished, except as otherwise required by law.

John H. Moer III

DATE 2-6-90

I, the undersigned, do solemnly swear and affirm that the above information is true and correct to the best of my knowledge and belief, and that the State of Florida, its officers, agents, and employees shall have the same at their expense, examined and used for no other purpose than the purpose for which it was furnished, except as otherwise required by law.

John H. Moer III

ASST T.

2-6-90
S-13 - 520-6816

Florida
Department of
Corporations

FILE NOW! CORPORATE STATUS WILL BE
DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT
1991



FLORIDA DEPARTMENT OF STATE
Division of State
Division of Corporations

A.F.R.

File No. 1
Date 7/1/91
Excluded
File No.

FILING FEE OF \$61.25 REQUIRED

Name and Mailing Address of Corporation DOCUMENT # NO4448 (9)

ZIP + 4 PRESORT
PLAZA VILLAS I CONDOMINIUM ASSOCIATION, INC.
C/O WALTER J. LARSON
534-47TH AVE., N.E.
ST PETERSBURG, FL 33703-3121

DO NOT WRITE IN THIS SPACE

2 If Address in Block 1 is incorrect in any way enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Street Address

22 PO Box No

23 City and State

24 Zip Code

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code

| 3 Date Incorporated or Qualified T/D Business in Florida | 4 FEI Number | FEI Number Applied For | 5 \$8.75 Fee required for a certificate of status |
|---|--------------|---------------------------|--|
| 07/25/1984 | 59-2454545 | FEI Number Not Applicable | CERTIFICATE OF STATUS |

6 Name and Street Address of Each Officer and Director (Do not use any correction tape or bond to cover over incorrect information)

| 1 | 2 Names of Officers and Directors | 3 Street Address of Each Officer and Director DO NOT USE POST OFFICE BOX NUMBER | 4 City and State |
|-----|--------------------------------------|---|--------------------|
| P/D | PURDUE, DAVID C DWYED BIGELOW | 534-47TH AVE., N.E. | ST PETERSBURG, FL |
| V/D | GATHOUR, RUSS MAGGIE GREEN | 534-47TH AVE., N.E. | ST PETERSBURG, FL |
| V/D | SLAZAS, RAY | 534-47TH AVE., N.E. | ST PETERSBURG, FL |
| S/D | MARIANO, LIMA KAREN STROUP | 534-47TH AVE. N.E. | ST. PETERSBURG, FL |
| T/D | BIGELOW, ED RUSS GATHOUR | 534 47TH AVE. N.E. | ST PETERSBURG, FL |
| A/T | MOOR, JOHN H. III | 534 47TH AVE. N.E. | ST PETERSBURG, FL |

REGISTERED AGENT INFORMATION

Name and Street Address of Current Registered Agent
MOOR, JOHN H. III
534-47TH AVE., N.E.
ST PETERSBURG, FL 33703

DO NOT USE POST OFFICE BOX NUMBER

DO NOT USE POST OFFICE BOX NUMBER

FL

I, John H. Moor, III, do solemnly swear that the above name and corporation is the true name of the corporation, that I am a registered agent or bookie in the State of Florida. Such corporation was authorized by the corporation board of directors by accepting the appointment as registered agent. I am number 10 and accept the conditions of Section 471.065, Florida Statutes.

2/8/91

SIGNATURE *John H. Moor, III*
(Registered Agent Accepting Appointment)

DATE

I, John H. Moor, III, do solemnly swear that the information indicated on the annual report or supplemental annual report is true and accurate and that my signature shall have the same force and effect as a written oath. I further certify that I am an officer or director of the corporation or the representative of the corporation to execute this report as required by Chapter 471, Florida Statutes, and that my name appears in block 6 or on an attachment to this document.

J. H. Moor, III

ASST. TLEIS

S13 1-722-6512

FILING FEE OF \$61.25 REQUIRED—Make Checks Payable To: Secretary of State **\$8.75 Additional Fee required
for a Certificate of Status**

**FILE NOW! CORPORATE STATUS WILL BE
DELINQUENT AFTER JULY 1ST.**

CORPORATION
ANNUAL REPORT
1992



FLORIDA DEPARTMENT OF STATE
For State
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
REC. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FLA.
FRED

FILING FEE \$61.25 Make Payable To: Secretary of State

1. DOCUMENT NUMBER **DOCUMENT # N04448 (9)**

PLAZA VILLAS I CONDOMINIUM ASSOCIATION, INC.
534-47TH AVE., NE
SAINT PETERSBURG FL 33703-3121

DO NOT WRITE IN THIS SPACE

2. If Address in Block 1 is incorrect in any way, list through the
incorrect information and enter the correct address below. If all
information is acceptable, then NAME of the corporation is to be checked
only by listing an asterisk(*).

21. Mailing Address

22. P.O. Box No. **P.O. Box 12709**

23. City and State **33733** 24. Zip Code

3. Date Incorporated or Organized
To Do Business in Florida **07/25/1984**

| 4. Date Last Filed | 4.1 Extension | FEES charged Approved for | \$ 8.75 |
|--------------------|-------------------|---------------------------|----------------------------------|
| 02/22/1991 | | FEES charged Not Approved | CERTIFICATE OF STATEMENT INDEXED |
| | 59-2454545 | | |

| 5. Name and Address of Each Officer and Director. Do not use any correction tape or black out any changes made in this block. | Street Address of Each Officer and Director | 6. City and State |
|---|--|----------------------------|
| P/D BIGELOW, EDWARD | 500F Santa Cruz Pl., NE | ST PETERSBURG, FL |
| V/D Johnson, Helma | 492C Santa Cruz Pl., NE | ST PETERSBURG, FL |
| V/D Malham, Olga | 484G Santa Cruz Pl., NE | ST PETERSBURG, FL |
| S/D STROOP, KAREN | 484A Santa Cruz Pl., NE | ST. PETERSBURG, FL. |
| T/D Paul, Christine | 492E Santa Cruz Pl., NE | ST PETERSBURG, FL. |
| A/T MOOR, JOHN H. III | 534-47TH AVE. N.E. | ST PETERSBURG, FL. |

REGISTERED AGENT INFORMATION

**MOOR, JOHN H. III
534-47TH AVE., N.E.
ST PETERSBURG, FL 33703**

Jay J Merritt

300 31st Street North, Suite 125

St. Petersburg FL 33713

SIGNATURE *Edward Bigelow*

6/29/92

Edward Bigelow

President

813 527-9B91

File Now. Filing Fee after May 1 is \$225.00

ANNUAL REPORT
1993



DEPARTMENT OF STATE
Division of Corporations

RECEIVED
MAY 11, 1993
FLORIDA DEPT. OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # NO4448 (9)

PLAZA VILLAS I CONDOMINIUM ASSOCIATION, INC.

4691 Laurel Oak Lane NE
St. Petersburg FL
33703

FILING FEE
\$200.00

ANNUAL REPORT \$125 + \$138.75 CORPORATION SUPPLEMENTAL FEE
MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

| | | | |
|--------------------------|----------------------|--|-------------------|
| 1700 McMullen Booth Road | 2a. Mailing Address | 5. Certificate of State Demand | \$8.75 |
| Suite C-3 | 2b. Business Address | 6. Person Designated to Receive Meetings and Communications | \$5.00 |
| Clearwater, FL | 2c. City & State | 7. Nonresident Officer(s) For Exempt Status | \$138.75 |
| 34619 | 2d. Zip Code | 8. Person Designated to Receive Meetings and Communications | Fees Not Required |
| (2) Pinellas | (2e) County | 9. Name and Address of New Registered Agent | |

9. Name and Address of Current Registered Agent

ART LEBURNE
SEABOARD ARBORS MGT. SERVICES, Inc.
1700-MCMULLEN-BOOTH RD., STE C-3
CLEARWATER FL 34619

10. Name and Address of New Registered Agent

| | | | | | |
|----------------------------|---|------------------------|-----------------|-----------------------|------------------------|
| 11. Name Joyce M. Hicks | 12. Street Address C/o Seaboard Arbors Management Services | 13. City Clearwater | 14. State FL | 15. Zip Code 34619 | 16. County Pinellas |
|----------------------------|---|------------------------|-----------------|-----------------------|------------------------|

DATE 3-16-93

Joyce M. Hicks

Signature

FILE NOW! FILING FEE AFTER MAY 1 IS \$225.00

47794B-2658
CORPORATION

ANNUAL REPORT

1994



DOCUMENT #
N04448 (9)

APPROVED

FILED

SH 572-4 AM 0:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name of Business

PLAZA VILLAS I CONDOMINIUM ASSOCIATION, INC.

Period of Business

1700 McMULLEN BOOTH ROAD
SUITE C3
CLEARWATER FL 34619
US

494 LAUREL OAK LANE NE
ST PETERSBURG FL 33703

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Organized 07/25/1984 24. Date of Last Report 03/19/1993

2. Mailing Address

21 [REDACTED]

22 [REDACTED]

23 [REDACTED]

24 [REDACTED]

25. Period of Business

26 [REDACTED]

27 [REDACTED]

28 [REDACTED]

29 [REDACTED]

30 [REDACTED]

4. Filing Number 59-245455 15. County of Inc. FL

5. Certificate of Status Required 16. Location of Incorporation
\$8.75 Florida, FL Fund Capital \$1,000.00

7. Corporation Exempt from \$1,000.00 17. \$5.00 Min. Br.
Supplementary Fee Added to Fees

8. This corporation has authority to do business in under S. Florida Statute No

9. Name and Address of Current Registered Agent

HICKS JOYCE M
C/O SEABOARD ARBORS MANAGEMENT SVC
1700 McMULLEN BOOTH RD SUITE C-3
CLEARWATER FL 34619

10. Name and Address of New Registered Agent

61 [REDACTED]

62 [REDACTED] New Address No Change in fact Address same

63 [REDACTED]

64 [REDACTED] FL 65 [REDACTED]

11. For the purpose of Sections 807, 809 and 817, 819 and 817.1, 820, the registered agent is the designated corporation officer named above who will receive all notices and other papers to be served on the corporation. The registered agent is authorized by the corporation's Board of Directors to accept the service of process of his/her agent, if no service is made, and to accept the deposit of documents at the office of the Clerk of Court of the State of Florida, Tallahassee.

DATE _____

12. OFFICERS AND DIRECTORS

| P/D | NAME | CHANGES TO OFFICERS AND DIRECTORS IN |
|------|---|---|
| PAUL | CHRISTINE 492 E SANTA CRUZ PL NE ST PETERSBURG FL 33703 | NAME TITLE ADDRESS/PHONE MAILING ADDRESS |
| V/D | JOHNSON HELMA 492 C SANTA CRUZ PL NE ST PETERSBURG FL 33703 | NAME TITLE ADDRESS/PHONE MAILING ADDRESS |
| V/D | MALHAM OLGA 484 G SANTA CRUZ PL NE ST PETERSBURG FL 33703 | NAME TITLE ADDRESS/PHONE MAILING ADDRESS |
| S/D | WORON DAN 5000 SANTA CRUZ PL NE ST PETERSBURG FL 33703 | NAME TITLE ADDRESS/PHONE MAILING ADDRESS |
| T/D | BRENDELL AMANDA 478 H SANTA CRUZ PL NE ST PETERSBURG FL 33703 | NAME TITLE ADDRESS/PHONE MAILING ADDRESS |

13. Any other information required by law to be filed with the Secretary of State.

SIGNATURE:

Christine E. Paul
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Christine E. Paul

8/17/94 813-893-8493

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

ANNUAL REPORT

1995



DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # N04448 (9)

PLAZA VILLAS I CONDOMINIUM ASSOCIATION, INC.

1. Name of Business

4691 LAUREL OAK LANE NE
ST PETERSBURG FL 33703

Meeting Address

1700 MCMULLEN BOOTH ROAD
SUITE C-3
CLEARWATER FL 34619
US

2. Mailing Address

26 1700 McMullen Booth Rd.

3. City, State

27 Suite C-3
Clearwater, FL 34619

4. Zip Code

25 34619

5. County

26 34619

6. Zip Code

27 34619

7. City, State

28 Clearwater, FL 34619

8. Zip Code

29 34619

9. Name and Address of Current Registered Agent

HICKS JOYCE M
C/O SEABOARD ARBORS MANAGEMENT SVC
1700 MCMULLEN BOOTH RD SUITE C-3
CLEARWATER FL 34619

10. Name and Address of New Registered Agent

11. Duties to be Performed in This Space

3. Date Incorporated or Organized 12a. Date of Last Report

07/25/1984 04/04/1994

4. FEIN Number 13a. Tax Exempt Status

59-2454545 13b. Tax Exempt Status

\$8.75 Additional Fee Requested

5. Continuation of Status Document 14a. \$5.00 Mgt. Fee

6. Extension of Corporation Fee 14b. Added to Fees

7. Nonresident Agent Fee 15a. \$68.75 Supplemental

8. Tax Preparation Services 15b. Fee Not Required

10. Name and Address of New Registered Agent

61 Name Lennard A. Leighton

62 Street 1700 McMullen Booth Rd. Suite C-3

63 City

64 Zip Code Clearwater, FL FL 34619

2/8/95

| 12. Officers/Directors | 13. Officers/Directors |
|---|--|
| PD PAUL CHRISTINE 492 E SANTA CRUZ PL NE ST. PETERSBURG FL 33703 | PD Janet McCabe 492 F Santa Cruz Pl NE St. Petersburg, FL 33703 |
| VD JOHNSON, HELMA 492 C SANTA CRUZ PL NE ST. PETERSBURG FL 33703 | VD Helma Johnson Starr Purdue 492 C Santa Cruz Pl NE. 476D Santa Cruz St. Petersburg, FL 33703 |
| VD MALHAM, OLGA 484 G SANTA CRUZ PL NE ST. PETERSBURG FL 33703 | VD Olga Malham 484 G Santa Cruz Pl NE St. Petersburg, FL 33703 |
| SD MCCABE, JANET 492F SANTA CRUZ PL NE ST. PETERSBURG FL | SD Christine Paul 492 E Santa Cruz Pl NE. St. Petersburg, FL 33703 |
| TD BRENDLE, AMANDA 476 H SANTA CRUZ PL NE ST. PETERSBURG FL 33703 | TD Amanda Brendle 476 H Santa Cruz Pl NE St. Petersburg, FL 33703 |

SIGNATURE:

Janet McCabe

Janet McCabe, President

1/27/95 301-3652-