

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26155

FILED  
Apr 27, 2005  
Secretary of State

Entity Name: NEIGHBORHOOD F HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O RAMPART PROP  
10033 9TH STREET N 2ND FLOOR  
ST PETERSBURG, FL 33716 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O RAMPART PROP  
10033 9TH STREET NO 2ND FLOOR  
ST PETERSBURG, FL 33716 US

**New Mailing Address:**

FEI Number: 59-2900868      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

RAMPART PROPERTIES, INC  
10033 9TH STREET NORTH, 2ND FLOOR  
C3  
ST PETERSBURG, FL 33716 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: VPD ( ) Delete  
Name: MULLANEY, JOHN  
Address: 10033 9TH STREET N. 2ND FLOOR  
City-St-Zip: SAINT PETERSBURG, FL 337163804

Title: TD ( ) Delete  
Name: SELDIN, RACHEL  
Address: 10033 NINTH ST N 2ND FLOOR  
City-St-Zip: ST. PETERSBURG, FL 337163804

Title: SD ( ) Delete  
Name: DEININGER, BARBARA  
Address: 10033 NINTH STREET N 2ND FLOOR  
City-St-Zip: ST PETERSBURG, FL 337163804

Title: PD ( ) Delete  
Name: WILEY, ANNE  
Address: 10033 NINTH ST N 2ND FLOOR  
City-St-Zip: ST. PETERSBURG, FL 337163804

Title: D ( ) Delete  
Name: GEIS, STEPHEN  
Address: 10033 NINTH STREET N 2ND FLOOR  
City-St-Zip: ST PETERSBURG, FL 337163804

Title: D ( ) Delete  
Name: VAN SON, PETER  
Address: 10033 9TH STREET N 2ND FLOOR  
City-St-Zip: SAINT PETERSBURG, FL 337163804

**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:

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: ANNE WILEY

PD

04/27/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date