

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43743

FILED  
Mar 21, 2007  
Secretary of State

**Entity Name:** THE ANTIQUA AT DOLPHIN CAY OWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

4717 DOLPHIN CAY LANE S.  
SAINT PETERSBURG, FL 33711

**New Principal Place of Business:**

**Current Mailing Address:**

4779 DOLPHIN CAY LANE S.  
SAINT PETERSBURG, FL 33711

**New Mailing Address:**

**FEI Number:** 59-3127597

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CONDOMINIUM ASSOCIATES  
3001 EXECUTIVE DRIVE  
SUITE 260  
CLEARWATER, FL 33762 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: TD ( ) Delete  
Name: CAPALBO, ANTHONY  
Address: 4717 DOLPHIN CAY LANE S, #606  
City-St-Zip: SAINT PETERSBURG, FL 33711

Title: PD ( ) Delete  
Name: MELBY, ROBERT  
Address: 4717 DOLPHIN CAY LANE S, #408  
City-St-Zip: SAINT PETERSBURG, FL 33711

Title: D ( ) Delete  
Name: FINER, CHARLES  
Address: 4717 DOLPHIN CAY LANE S, #507  
City-St-Zip: SAINT PETERSBURG, FL 33711

Title: SD ( ) Delete  
Name: CORTY, SUSANNE  
Address: 4717 DOLPHIN CAY LANE S, #504  
City-St-Zip: SAINT PETERSBURG, FL 33711

Title: VD ( ) Delete  
Name: STICKLEY, WILLIAM  
Address: 4717 DOLPHIN CAY LANE S, #603  
City-St-Zip: SAINT PETERSBURG, FL 33711

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

Title: TD (X) Change ( ) Addition  
Name: ROBERT, BABCOCK  
Address: 4717 DOLPHIN CAY LANE S, #202  
City-St-Zip: SAINT PETERSBURG, FL 33711

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

Title: D (X) Change ( ) Addition  
Name: FINZER, CHARLES  
Address: 4717 DOLPHIN CAY LANE S, #507  
City-St-Zip: SAINT PETERSBURG, FL 33711

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 Chapter 119, 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: ROBERT MELBY

PRES

03/21/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date