

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # N01000002246

1. Entity Name

MANDALAY BEACH CLUB OWNER'S ASSOCIATION, INC.



FILED

04 APR 19 PM 2:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

10 PAPAYA STREET
CLEARWATER FL 33767

Mailing Address

10033 NINTH STREET NORTH
ST. PETERSBURG FL 33716-3804

2. Principal Place of Business

10 PAPAYA ST.

3. Mailing Address

10 Papaya St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Clearwater

City & State

Clearwater

Zip

FL

Country

33767

Zip

FL

Country

33767

MOORE

CR2E037 (11/03)

4. FEI Number

03-0383797

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RAMPART PROPERTIES, INC.
10033 NINTH STREET NORTH
ST PETERSBURG FL 33716-3804

7. Name and Address of New Registered Agent

Name STEVEN H. MEZER

Street Address (P.O. Box Number is Not Acceptable)
220 SOUTH FRANKLIN ST.

City TAMPA

FL

Zip Code 33802

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.

600033412806
04/21/04--01027--027 **61.25

SIGNATURE

SEE ATTACHED

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	ZILISCH, BARBARA	
STREET ADDRESS	10033 NINTH STREET NORTH	
CITY-ST-ZIP	ST PETERSBURG FL 33716-3804	
TITLE	VPD	<input checked="" type="checkbox"/> Delete
NAME	TOUCHTON, WALTER	
STREET ADDRESS	10033 NINTH STREET NORTH	
CITY-ST-ZIP	ST PETERSBURG FL 33716-3804	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	HOLIDAY, J. ARDEN	
STREET ADDRESS	10033 NINTH STREET NORTH	
CITY-ST-ZIP	ST PETERSBURG FL 33716-3804	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	YOFAN, AVI	
STREET ADDRESS	10033 NINTH STREET NORTH	
CITY-ST-ZIP	ST. PETERSBURG FL 33716-3804	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	BARRETT, BILL	
STREET ADDRESS	10033 NINTH STREET NORTH	
CITY-ST-ZIP	ST. PETERSBURG FL 33716-3804	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Zilisch, Barbara	
STREET ADDRESS	11 SAN MARCO ST, #708	
CITY-ST-ZIP	Clearwater, FL 33767	
TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Touchton, Walter	
STREET ADDRESS	10 Papaya St. #702	
CITY-ST-ZIP	Clearwater, FL 33767	
TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NOVOGRATZ, JOSEPH	
STREET ADDRESS	11 SAN MARCO ST #1401	
CITY-ST-ZIP	Clearwater, FL 33767	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YOFAN, AVI	
STREET ADDRESS	10 Papaya St. #1202	
CITY-ST-ZIP	Clearwater, FL 33767	
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Barrett, Bill	
STREET ADDRESS	11 SAN MARCO ST, #306	
CITY-ST-ZIP	Clearwater, FL 33767	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Barbara Zilisch

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-14-04

Date

727-449-8852

Daytime Phone #