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Secretary of State
04-27-2005 90283 038 ****61.25

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 745995

1. Entity Name
NORTH BAY VILLAGE CONDOMINIUM ASSOCIATION, INC.

40069313 APR 21 2005

Principal Place of Business	Mailing Address
6313 NEWTOWN CIRCLE 552 MAIN ST TAMPA, FL 33615 US	C/O RAMPART PROPERTIES, INC 10033 9TH ST N 2ND FL ST PETERSBURG, FL 33716 US

04152005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	c/o Erdman Property Mgmt, Inc Suite, Apt. #, etc. #102-696 1st Ave N
City & State	City & State St. Petersburg
Zip / Country	Zip / Country 33701 / Pinellas

4. FEI Number 59-1975321 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SMITH, BRIAN K. % RAMPART PROPERTIES, INC. 10033 9TH STREET NORTH 2ND FLOOR SAINT PETERSBURG, FL 33716	Name: JJ Erdman Street Address (P.O. Box Number is Not Acceptable): 696 1st Ave N, #102 City: St. Petersburg FL Zip Code: 33701

8. 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.

SIGNATURE: JJ Erdman DATE: 4/18/05
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2005

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MURPHY, PAT 10033 NINTH STREET NORTH ST. PETE, FL 33716	■ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P.D. ALLEN BURCHELL 6317 NEWTOWN CIRCLE B3 TAMPA FL 33615
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD REBUCK, DEBRA 10033 NINTH STREET NORTH ST. PETE, FL 33716	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V.P.D. MICHAEL BURNS 6312 NEWTOWN CIR. B2 TAMPA, FL 33615
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LEDUC, ROSE 10033 NINTH STREET NORTH ST. PETE, FL 33716	■ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S.D BUTCH GORE 6311 NEWTOWN CIR. B1 TAMPA, FL 33615
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MONAHAN, DALE 10033 NINTH STREET NORTH ST. PETE, FL 331763804	■ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BEN GILVIN 6312 NEWTOWN CIR A5. TAMPA, FL 33615
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD HULT, ALLEN 10033 NINTH STREET NORTH ST PETE, FL 33716	■ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D AMY BALLESTER 6309 NEWTOWN CIR B3 TAMPA, FL 33615
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D REIKER, BETTY 10033 NINTH STREET NORTH ST PETE, FL 33716	☐ Delete	TITLE / 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: Allen Burchell 4/18/2005 (813) 855-6865
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #