

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 15, 2007  
Secretary of State**

DOCUMENT# N16730

Entity Name: 5282 95TH STREET NORTH CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5282 95TH ST. N.  
UNIT #2  
ST. PETERSBURG, FL 33708

**New Principal Place of Business:**

**Current Mailing Address:**

11000 70TH AVENUE NORTH  
SEMINOLE, FL 33772

**New Mailing Address:**

FEI Number: 59-2877527      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SAUL, JAMES  
11000 70TH AVENUE NORTH  
SEMINOLE, FL 33772    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: PD ( ) Delete  
Name: ANTHONY SABBA,  
Address: 5282 95TH ST. N.  
City-St-Zip: ST. PETERSBURG, FL 33708

Title: TD ( ) Delete  
Name: SAUL, JAMES J  
Address: 5282 95TH STREET N  
City-St-Zip: ST. PETERSBURG, FL 33708

Title: SD ( ) Delete  
Name: SABBA, DAWNE  
Address: 5282 95TH ST. N.  
City-St-Zip: ST. PETERSBURG, FL 33708

**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:

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: JAMES J SAUL

TD

02/15/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date