## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## Apr 13, 2007 8:00 am Secretary of State **DOCUMENT # 723119** 1. Entity Name 04-13-2007 90168 032 \*\*\*\*61.25 **BOCA CIEGA POINT EAST TWELVE CONDOMINIUM** CORPORATION, INC. Principal Place of Business Mailing Address ORPORATION, INC. ORPORATION, INC. 275 BOCA CIEGA PT BLVD S ST. PETERSBURG FL 33708 275 BOCA CIEGA PT BLVD S ST. PETERSBURG FL 33708 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For 59-1563447 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FEDERATION OF BOCA CIEGA PT CONDO, INC. Street Address (P.O. Box Number is Not Acceptable) 275 BOCA CIEGA PT BLVD ST. PETERSBURG FL 33708 Zip Code 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 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 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. HHE SD Delete TITLE Change ■ Addition NAME KERSH, GUY NAME STREET ADDRESS 275 BOCA CIEGA PT. BL. STREET ADDRESS CITY-S1-7IP ST. PETERSBURG FL CITY-S1-ZIP TITLE Delete THIF ☐ Change ■ Addition NAME GREGORY, JIM NAME STREET ADDRESS 275 BOCA CIEGA PT. BL STREET ADDRESS CITY-S1-ZIP SAINT PETERSBURG FL 33708 CITY-ST-ZIP HHE 🔀 Delele THEE Change ☐ Addition NAME AZZARELLO, CHARLIE NAME STREET ADDRESS STREET ADDRESS 275 BOCA CIEGA PT BLVD CITY - ST - ZIP CITY-ST-7IP SAINT PETERSBURG FL 33708 TITLE TD ☐ Delete THILE ☐ Change ☐ Addition Janet Hyland NAME NAME HYBEND, JANET STREET ADDRESS STREET ADDRESS 275 BOCA CIEGA PT BLVD CITY-ST-ZIP SAINT PETERSBURG FL 33708 CITY ST-7IP TITLE Delete ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CiTY-S1-7IP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 impowered 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:

TURE AND TYPEDON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/29/07

398-1270

FILED