

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

FILED
Apr 13, 2007 8:00 am
Secretary of State

04-13-2007 90168 013 ****61.25

DOCUMENT # 722178

1. Entity Name

**BOCA CIEGA POINT EAST FIVE CONDOMINIUM
CORPORATION, INC.**



Principal Place of Business

**PORATION, INC.
275 BOCA CIEGA POINT BLVD
ST. PETERSBURG FL 33708**

Mailing Address

**PORATION, INC.
275 BOCA CIEGA POINT BLVD
ST. PETERSBURG FL 33708**



2. Principal Place of Business - No P.O. Box #

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1571032

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

1st MOORE

CR2E037 (10/06)

6. Name and Address of Current Registered Agent

**FEDERATION OF BOCA CIEGA PT CONDO, INC.
275 BOCA CIEGA POINT BLVD
ST. PETERSBURG FL 33708**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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
Due By May 1, 2007**

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
NAME: MARKLEY, ROBERT
STREET ADDRESS: 275 BOCA CIEGA PT BLVD
CITY-ST-ZIP: SAINT PETERSBURG FL 33708 ☐ Delete

TITLE: DS
NAME: GROSS, MICHAEL
STREET ADDRESS: 275 BOCA CIEGA PT BLVD.
CITY-ST-ZIP: SAINT PETERSBURG FL 33708 ☐ Delete

TITLE: TD
NAME: MARKLEY, STEUART
STREET ADDRESS: 275 BOCA RIDGE PT BLVD
CITY-ST-ZIP: SAINT PETERSBURG FL 33708 ☐ Delete

TITLE: VPD
NAME: GIFFORD, RICHARD
STREET ADDRESS: 275 BOCA CIEGA PT BLVD
CITY-ST-ZIP: SAINT PETERSBURG FL 33708 ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: V/D
NAME: Robert Markley
STREET ADDRESS: 275 Boca Ciega Pt. Blvd.
CITY-ST-ZIP: St. Pete., FL 33708 ☒ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: P/D
NAME: Richard Gifford
STREET ADDRESS: 275 Boca Ciega Pt. Blvd
CITY-ST-ZIP: St. Pete., FL 33708 ☒ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

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 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:

Robert Markley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

727
3/16/07 398-1270
Date Daytime Phone #