

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000011920

**FILED**  
**Jan 11, 2010**  
**Secretary of State**

**Entity Name:** 306 SOUTH FREMONT CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

306 S FREMONT AVE  
TAMPA, FL 33606

**New Principal Place of Business:**

**Current Mailing Address:**

306 S FREMONT AVE  
TAMPA, FL 33606

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

306 S FREMONT AVE HOA  
306 S FREMONT AVE  
TAMPA, FL 33609 US

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

306 S FREMONT AVE HOA  
306 S FREMONT AVE  
TAMPA, FL 33606 US

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: SABRINA YARE CLIPPARD

01/11/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: 1  
Name: LOMBARD, MARLA  
Address: 306 S FREMONT AVE UNIT D  
City-St-Zip: TAMPA, FL 33606

Title: 2  
Name: WOODWARD LINSLEY, KARLA  
Address: 306 S FREMONT AVE UNIT A  
City-St-Zip: TAMPA, FL 33606

Title: 3  
Name: YARE CLIPPARD, SABRINA  
Address: 306 S FREMONT AVE UNIT B  
City-St-Zip: TAMPA, FL 33606

Title: 4  
Name: MEHTA DESAI, AVANI  
Address: 306 S FREMONT AVE UNIT C  
City-St-Zip: TAMPA, FL 33606

I hereby 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 all other like empowered.

SIGNATURE: SABRINA YARE CLIPPARD

MRS.

01/11/2010

Electronic Signature of Signing Officer or Director

Date