2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with an address, with all other like empowers

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR PRECTOR

SIGNATURE:

Apr 26, 2005 8:00 am **DOCUMENT # 715709** Secretary of State 1. Entity Name 04-26-2005 90177 003 ****61.25 BOCA CIEGA POINT EAST "ONE" CONDOMINIUM, INC. Principal Place of Business Mailing Address 275 BOCA CIEGA POINT BLVD. ST. PETERSBURG FL 33708 275 BOCA CIEGA POINT BLVD. ST. PETERSBURG FL 33708 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) 4. FEI Number Applied For City & State City & State 59-1561870 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FEDERATION OF BOCA CIEGA PT CONDO, INC. Street Address (P.O. Box Number is Not Acceptable) 275 BOCA CIEGA POINT 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 DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. $\overline{\mathsf{TD}}$ TITLE ★ Addition TITLE Delete BEVELHIMER, PAT NAME NAME Lonnie 275 BOCA CIEGA PT BLVD STREET ADDRESS STREET ADDRESS SAINT PETERSBURG FL 33708 CITY-ST-ZIP CITY-ST-ZIP VPD TITLE ★ Addition TITLE □ Delete MAZUREK, BEN NAME NAME 275 BOCA CIEGA PT BLVD STREET ADDRESS STREET ADDRESS SAINT PETERSBURG FL 33708 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE MARSHALL, GENEVIEVE NAME 275 BOCA CIEGA PT BLVD. STREET ADDRESS STREET ADDRESS SAINT PETERSBURG FL 33708 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE HERMANN, PETER NAME NAME 275 BOCA CIEGA PT BLVD STREET ADDRESS STREET ADDRESS SAINT PETERSBURG FL 33708 CITY-ST-ZIP CITY-ST-ZIP ☐ Defete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ■ Addition Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 experience tall 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 trulatee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

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