## 2006 NOT-FOR-PROFIT CORPORATION

## Mar 28, 2006 8:00 am **ANNUAL REPORT Secretary of State DOCUMENT #719576** 03-28-2006 90126 038 \*\*\*\*61.25 1. Entity Name MAINLANDS OF TAMARAC BY THE GULF UNIT NO. 1 ASSOCIATION, INC. Principal Place of Business Mailing Address 20021837 10161 49TH ST., N. 10161 49TH ST., N. PINELLAS PARK, FL 34666 US PINELLAS PARK, FL 34666 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03012006 Chg-NP CR2E037 (11/05) 4. FEI Number 59-1514233 Applied For City & State City & State Not Applicable Zip Country Zip 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 MAINLANDS OF TAMARAC 10161 49TH STREET Street Address (P.O. Box Number is Not Acceptable) PINELLAS PARK, FL 33782 City 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 Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2006 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition JONES, PATRICK NAME NAME 9364 45 ST N STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PINELLAS PARK, FL 33782 CITY-ST-ZIP ■ Delete TITLE TITLE Change Addition Dalton, Chuet GANNON, KATHRYN NAME NAME STREET ADDRESS 9705 MAINLANDS BLVD STREET ADDRESS PINELLAS PARK, FL 33782 CITY-ST-ZIP CITY-ST-ZIP TITLE VPD Delete TITLE ☐ Change ☐ Addition NAME DEFRANCO, HARRIET NAME 9765 44 WAY STREET ADDRESS STREET ADDRESS PINELLAS PARK, FL 33782 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition HILL, CAROLYN NAME NAME 9800 WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PINELLAS PARK, FL 00000, CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Channe ☐ Addition PEGNETTER, JACK NAME NAME STREET ADDRESS 9359 45TH ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PINELLAS PARK, FL 33782 ☐ Delete TITLE ☐ Change ☐ Addition TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNING OFFICER OR DIRECTOR

NAME

STREET ADDRESS

CITY-ST-7IP

SIGNATURE:

STREET ADDRESS CITY-ST-7IP

DUFFIELD, CLYDE

9673 MAINLANDS BLVD.

PINELLAS PARK, FL 33782

SNATURE AND TYPED OR PRINTED MALE

Daytime Phone #

FILED

## ATTACHMENT

26621837 #719576

2 VP/D
Thomas, George
4493-94th Terr.
Pinellas Park, FL 33782