## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## **Secretary of State DOCUMENT #719916** 03-14-2008 90033 025 \*\*\*\*61.25 BOCÁ CIEGA POINT EAST "TWO" CONDOMINIUM CORPORATION, INC. 40045436 Principal Place of Business Mailing Address 275 BOCA CIEGA POINT BLVD. 275 BOCA CIEGA POINT BLVD. ST. PETERSBURG, FL 33708 ST. PETERSBURG, FL 33708 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01242008 Chg-NP CR2E037 (12/06) City & State City & State 4. FEI Number Applied For 59-1561869 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FEDERATION OF BOCA CIEGA PT CONDO, INC. 275 BOCA CIEGA POINT BLVD Street Address (P.O. Box Number is Not Acceptable) ST. PETERSBURG, FL 33708 Zip Code City FL 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) 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, 2008 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE PDT Delete TITLE ☐ Addition ☐ Change MEINHARDT, MELODY NAME NAME 275 BOCA CIEGA PT. BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG, FL 33708 CITY-ST-ZIP DS TITLE Delete TITLE □ Change ☐ Addition PEABODY, BARBARA NAME NAME STREET ADDRESS 275 BOCA CIEGA PT. BLVD STREET ADDRESS CITY-ST-7IP SAINT PETERSBURG, FL 33708 CITY-ST-ZIP ĎΤ TITLE ☐ Delete TITLE □ Change ☐ Addition NAME DENVER, BETH NAME STREET ADDRESS 275 BOCA CIEGA PT. BLVD STREET ADDRESS SAINT PETERSBURG, FL 33708 CITY-ST-7IP CITY-ST-ZIP VD Delete TITLE TITLE ■ Addition GARDINA, DAVID NAME NAME STREET ADDRESS 275 BOCA CIEGA PT. BLVD STREET ADDRESS SAINT PETERSBURG, FL 33708 CITY-ST-ZIP CITY-ST-7/P TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling 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.

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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FILED Mar 14, 2008 8:00 am