

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723268

FILED
Apr 30, 2004
Secretary of State**Entity Name:** WINSTON PARK NORTHEAST 200 ASSOCIATION, INC.**Current Principal Place of Business:**10033 9TH ST N 2ND FLOOR
ST PETERSBURG, FL 33716**New Principal Place of Business:****Current Mailing Address:**10033 9TH ST N 2ND FLOOR
ST PETERSBURG, FL 33716**New Mailing Address:****FEI Number:** 59-1461580**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**RAMPART PROPERTIES INC
10033 9TH ST N
2ND FLOOR
ST PETERSBURG, FL 33176 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: RICE, ROBERT
Address: 10033 9TH ST N
City-St-Zip: ST PETERSBURG, FL 337163805

Title: VPD () Delete
Name: BRADBURY, DALLAS
Address: 10033 NINTH ST N 2ND FL
City-St-Zip: ST PETERSBURG, FL 337163805

Title: PD () Delete
Name: MOZA, DONALD
Address: 10033 NINTH STREET NORTH
City-St-Zip: SAINT PETERSBURG, FL 33716

Title: ASD () Delete
Name: SHAFER, NANCY
Address: 10033 NINTH ST N 2ND FL
City-St-Zip: ST PETERSBURG, FL 337163805

Title: D () Delete
Name: ROBERTS, PEGGY
Address: 10033 NINTH ST N 2ND FL
City-St-Zip: ST PETERSBURG, FL 337163805

Title: TD () Delete
Name: GROOVER, WALLACE
Address: 10033 NINTH ST N 2ND FL
City-St-Zip: ST PETERSBURG, FL 337163805

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AST (X) Change () Addition
Name: MOBRAY, CLAIRE
Address: 10033 NINTH ST N 2ND FL
City-St-Zip: ST PETERSBURG, FL 337163805

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DONALD MOZA

PD

04/30/2004

Electronic Signature of Signing Officer or Director

Date