## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 725569** 

FILED Jaņ 1<u>2, 2</u>006 Secretary of State

Entity Name: PASCO BUILDING ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

NEW PORT RICHEY, FL 34655 LIS

**Current Mailing Address: New Mailing Address:** 

9851 ST RD 54

NEW PORT RICHEY, FL 34655 US

FEI Number: 59-1354549 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BECKWITH, NITA H. 9851 ST RD 54

NEW PORT RICHEY, FL 34655 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:

Date

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

MOURTAKOS, ALEX ROBLES, KEVIN Name: Name: 16017 N. FLORIDA AVENUE, SUITE 124 Address: 1244 S. PINELLAS AVENUE Address:

City-St-Zip: LUTZ, FL 33549 City-St-Zip: TARPON SPRINGS, FL 34689

Title: Title: ( ) Delete (X) Change ( ) Addition

MOURTAKOS, ALEX Name: PALKA, RUSS Name:

Address: 3054 ALACHUA PLACE Address: 5439 BEAUMONT CENTER BLVD City-St-Zip: NEW PORT RICHEY, FL 34655 City-St-Zip: TAMPA, FL 33634

Title: PED () Delete Title: () Change () Addition FUDGE, ROBERT Name: Name:

2300 CURLEW ROAD Address: Address: City-St-Zip: PALM HARBOR, FL 34683 City-St-Zip:

Title: SD Title: SD (X) Change ( ) Addition ( ) Delete

Name: COLLINS, THERESA Name: REYNOLDS, B.J. 4904 EISENHOWER BLVD. SUITE 150 11324 RIDGE ROAD Address: Address:

City-St-Zip: TAMPA, FL 33634 City-St-Zip: NEW PORT RICHEY, FL 34654

AVP Title: () Delete Title: (X) Change ( ) Addition

POMERLEAU, GIGI DUGAN, RUSTY Name: Name:

13971 LAKE POINT DRIVE 17315 FAIRWAY SPRINGS BLVD Address: Address:

City-St-Zip: CLEARWATER, FL 33762 City-St-Zip: NEW PORT RICHEY, FL 34655

Title: () Delete Title: (X) Change ( ) Addition

YANNON, JOE ROBLES, KEVIN Name: Name:

Address: 5415 FRONT STREET Address: 16017 N. FLORIDA AVE, SUITE 124

HOLIDAY, FL 34690 LUTZ, FL 33549 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: ALEX MOURTAKOS PD 01/12/2006

Electronic Signature of Signing Officer or Director

Date