## 200 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED May 08, 2006 8:00 am Secretary of State

| DOCUMENT # 731374  1. Entity Name PARADISE POINTE WEST COMMUNITY ASSOCIATION, INC.   |   |   | 05-08-2006 90294 030 ****70.00  |                                     |
|--|---|---|---|-------------------------------------|
| Principal Place of Business<br>11945 PARADISE POINTE WAY<br>NEW PORT RICHEY, FL 34654  | Mailing Address<br>11945 PARADISE POII<br>NEW PORT RICHEY, FL |   | ) (487)     1888  |                                     |
| 2. Principal Place of Business   | 3. Mailing Address  |   | 1 10011 1000 1110 1100 1111 1000 1111 |                                     |
| Suite, Apt. #, etc.  | Suite, Apt. #, etc.   |   | 01062006 Chg-NP CR2E037 (11/05)   |                                     |
| City & State   | City & State  |   | 4. FEI Number Applied 59-1582935 Not App  |                                     |
| Zip Country  | Zip   | Country   | 5. Certificate of Status Desired \$8.75 Additional Fee Required   | af                                  |
| 6. Name and Address of Curre   | ent Registered Agent  |   | 7. Name and Address of New Registered Agent   |                                     |
| CORBIN, CECILIA<br>11825 CARISSA LA:<br>NEW PORT RICHEY, FL 34654  |   | Street A  | JON S. GAY oddress (P.O. Box Number is Not Acceptable) 3.38 Chevry WAY LM   |                                     |
|  |   | City X  | IEW PORTAILHEY FL 3465  |                                     |
| 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 religious)  DATE  |   |   |   |                                     |
| Filing Fee is \$61.25<br>Due by May 1, 2006  |   | mpaign Financing<br>Contribution.   | \$5.00 May Be Added to Fees Make check payable to Florida Department of State   |                                     |
| 10. OFFICERS AND   | DIRECTORS   | 11.   | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10   |                                     |
| IME PD   | ☐ Delete  | TITLE   | ☐ Change ☐  | Addition                            |
| NAME CAVILLE, STEVE  |   | NAME  |   |                                     |
| STREET ADDRESS 11348 CHERRY WAY  |   | STREET ADDRESS  |   | Í                                   |
| CITY-ST-ZIP NEW PORT RICHEY, FL 346  |   |   |   |                                     |
| TIFLE VP   | <del> </del>  | CITY-ST-ZIP   |   |                                     |
| =  | Delete  | TITLE   | VP Change   | Addition                            |
| NAME SCARAVIND, FRANK  | <del> </del>  | TITLE<br>NAME   | VP<br>GIADYS QUIND Change -   | Addition                            |
| NAME SCARAVIND, FRANK<br>STREET ADDRESS 11713 BOYNTON LN   | Delete  | TITLE<br>NAME<br>STREET AODRESS   | GIADIS QUINA Change   Change  | Addition                            |
| NAME SCARAVIND, FRANK STREET ADDRESS 11713 BOYNTON LN CITY-ST-ZIP NEW PORT RICHEY, FL 346  | ⊅≤0elete<br>54  | TITLE NAME STREET ADDRESS CITY-ST-ZIP   | GIADIS GWIND  GIADIS GWIND  11905 CATISSALW  NEW PETT RICKEY FLA 3465   | 4                                   |
| NAME SCARAVIND, FRANK STREET ADDRESS 11713 BOYNTON LN CITY-ST-ZIP NEW PORT RICHEY, FL 346 TITLE SD   | Delete  | TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE   | GIADIS GWINA<br>11905 CATISSALW<br>NEW PORT RICKLY FLA 3465   | Addition  Addition                  |
| NAME SCARAVIND, FRANK STREET ADDRESS 11713 BOYNTON LN CITY-ST-ZIP NEW PORT RICHEY, FL 346 TITLE SD NAME KILCOIN, GERALDINE   | ⊅≤0elete<br>54  | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME  | VF<br>GIADIS GWIND<br>11905 CATISSALW<br>NEW PART RICKEY FLA 3465   | 4                                   |
| NAME SCARAVIND, FRANK STREET ADDRESS 11713 BOYNTON LN CITY-ST-ZIP NEW PORT RICHEY, FL 346 TITLE SD NAME KILCOIN, GERALDINE   | ⊅≤0elete<br>54  | TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE   | VF<br>GIADIS GWIND<br>11905 CATISSALW<br>NEW PORT RICKEY FLA 3465   | 4                                   |
| NAME SCARAVIND, FRANK STREET ADDRESS 11713 BOYNTON LN CITY-ST-ZIP NEW PORT RICHEY, FL 346 TITLE SD NAME KILCOIN, GERALDINE STREET ADDRESS 11817 BAYONET LANE   | Delete ☐ Delete   | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS   |   | Addition                            |
| NAME SCARAVIND, FRANK STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL 346 TITLE SD NAME KILCOIN, GERALDINE STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL   | ⊅≤0elete<br>54  | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP   |   | Addition                            |
| NAME SCARAVIND, FRANK STREET ADDRESS 117713 BOYNTON LN NEW PORT RICHEY, FL 346 TITLE SD NAME KILCOIN, GERALDINE 11817 BAYONET LANE NEW PORT RICHEY, FL TITLE T   | Delete ☐ Delete   | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE   |   | Addition                            |
| NAME SCARAVIND, FRANK STREET ADDRESS 117713 BOYNTON LN CITY-ST-ZIP NEW PORT RICHEY, FL 346 TITLE SD KILCOIN, GERALDINE STREET ADDRESS 11817 BAYONET LANE NEW PORT RICHEY, FL TITLE T NAME CORBIN, CECILIA  | 54 Delete   | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME  |   | Addition                            |
| NAME SCARAVIND, FRANK STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL 346 TITLE SD NAME KILCOIN, GERALDINE STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL TITLE T NAME CORBIN, CECILIA STREET ADDRESS 11825 CARISSA LA.   | 54 Delete   | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS   | JON 5. GAY ACTANDE IN 11338 CHERRY WAY LN NEW PORT RICHEY FL 3465   | Addition                            |
| NAME STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL 346 TITLE SD KILCOIN, GERALDINE STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL TITLE T NAME CORBIN, CECILIA STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL TORBIN, CECILIA STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL 346 TITLE NAME   | Delete  Delete  | TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME  | JON 5. GAY ACTANDE IN 11338 CHERRY WAY LN NEW PORT RICHEY FL 3465   | Addition  Addition                  |
| NAME STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL 346 TITLE SD KILCOIN, GERALDINE STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL TORBIN, CECILIA STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL 346 TITLE NAME STREET ADDRESS  | Delete  Delete  | TITLE NAME STREET ADDRESS CITY-ST-ZIP  | JON 5. GAY ACTANDE IN 11338 CHERRY WAY LN NEW PORT RICHEY FL 3465   | Addition  Addition                  |
| NAME STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL 346 TITLE SD KILCOIN, GERALDINE STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL TITLE T NAME CORBIN, CECILIA STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL TORBIN, CECILIA STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL 346 TITLE NAME   | Delete  Delete  | TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME  | JON 5. GAY ACTANDE IN 11338 CHERRY WAY LN NEW PORT RICHEY FL 3465   | Addition  Addition                  |
| NAME STREET ADDRESS CITY-ST-ZIP  NEW PORT RICHEY, FL 346  TITLE SD NAME KILCOIN, GERALDINE STREET ADDRESS CITY-ST-ZIP  NEW PORT RICHEY, FL THE NAME CORBIN, CECILIA STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE TABLE THE NAME STREET ADDRESS CITY-ST-ZIP  TITLE THE THE THE THE THE THE THE THE THE TH  | Delete  Delete  | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | JON S. GAY Change   11338 Cherry WAY LN NEW PORT Richey Fl 3465   | Addition  Addition                  |
| NAME STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL 346 TITLE NAME STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL 346 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME THE TABLE TO | Delete  Delete  Delete  Delete                                | TITLE NAME STREET ADDRESS CITY-ST-ZIP  | JON S. GAY Change   11338 Cherry WAY LN NEW PORT Richey Fl 3465   | Addition Addition Addition Addition |
| NAME STREET ADDRESS CITY-ST-ZIP  NEW PORT RICHEY, FL 346  TITLE SD NAME KILCOIN, GERALDINE STREET ADDRESS CITY-ST-ZIP  NEW PORT RICHEY, FL THE NAME CORBIN, CECILIA STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE TABLE THE NAME STREET ADDRESS CITY-ST-ZIP  TITLE THE THE THE THE THE THE THE THE THE TH  | Delete  Delete  Delete  Delete                                | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | JON S. GAY Change   11338 Cherry WAY LN NEW PORT Richey Fl 3465   | Addition Addition Addition Addition |

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.

SIGNATURE: JOW S. GAY

4-28-06 727-

727-826-124