

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2007 08:00 A
Secretary of State

DOCUMENT # 740218

1. Entity Name
CORDOVA ESTATES HOMEOWNERS ASSOCIATION,
INC



Principal Place of Business
3230 HYDE PARK ROAD
PENSACOLA, FL 32503

Mailing Address
3230 HYDE PARK ROAD
PENSACOLA, FL 32503



04082007 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3058631

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TRINGAS, PAUL
3230 HYDE PARK RD.
PENSACOLA, FL 32503

**DO NOT WRITE
IN THIS SPACE**

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

Paul J. Tringas

(NOTE: Registered Agent signature required when reinstating)

DATE

4/8/07

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000701532

04/20/07-60062-012-61-25

10. OFFICERS AND DIRECTORS

TITLE VD
NAME CARTAYA, AL
STREET ADDRESS 3220 HYDE PARK RD.
CITY - ST - ZIP PENSACOLA, FL 00000,

TITLE D
NAME BAROCCO, PAUL
STREET ADDRESS 3210 HYDE PARK ROAD
CITY - ST - ZIP PENSACOLA, FL

TITLE D
NAME CLUBBS, ROGER
STREET ADDRESS 3245 HYDE PARK RD.
CITY - ST - ZIP PENSACOLA, FL

TITLE ST
NAME BAROCCO, LAURIE
STREET ADDRESS 3210 HYDE PARK ROAD
CITY - ST - ZIP PENSACOLA, FL

TITLE P
NAME TRINGAS, PAUL
STREET ADDRESS 3230 HYDE PARK RD.
CITY - ST - ZIP PENSACOLA, FL

TITLE D
NAME CLUBBS, LINDA
STREET ADDRESS 3240 HYDE PARK ROAD
CITY - ST - ZIP PENSACOLA, FL

**DO NOT WRITE
IN THIS SPACE**

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:

Paul J. Tringas
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/8/07 850-433-3700