

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 30, 2004  
Secretary of State**

DOCUMENT# 743049

Entity Name: SEMINOLE HILL VILLAS RESIDENT MANAGEMENT ASSOCIATION, INC.

**Current Principal Place of Business:**

**New Principal Place of Business:**

%RAMPART PROPERTIES, INC.  
10033 -9TH ST N.- 2ND FLR  
SAINT PETERSBURG, FL 33716

**Current Mailing Address:**

**New Mailing Address:**

%RAMPART PROPERTIES, INC.  
10033 -9TH ST N.- 2ND FLR  
SAINT PETERSBURG, FL 33716

FEI Number: 59-1840237      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:**

SMITH, BRIAN K  
%RAMPART PROPERTIES  
10033 -9TH ST N- 2ND FLR  
SAINT PETERSBURG, FL 33716

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:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GOLLATTSHECK, ALICE  
Address: 10033 -9TH ST N- 2ND FLR  
City-St-Zip: SAINT PETERSBURG, FL 33716

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

Title: TD ( ) Delete  
Name: UNDERHILL, EARL  
Address: 10033 -9TH ST N- 2ND FLR  
City-St-Zip: SAINT PETERSBURG, FL 33716

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

Title: VD ( ) Delete  
Name: MORACA, BILL  
Address: 10033 -9TH ST N- 2ND FLR  
City-St-Zip: SAINT PETERSBURG, FL 33716

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

Title: SD ( ) Delete  
Name: LAYTON, BETTY  
Address: 10033 9TH STREET NORTH  
City-St-Zip: SAINT PETERSBURG, FL 33716

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

Title: D ( ) Delete  
Name: ZIZANIS, HARRY  
Address: 10033 NINTH ST. N  
City-St-Zip: SAINT PETERSBURG, FL 33716

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: ALICE GOLLATTSHECK

PD

04/30/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date