

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756214

FILED
Apr 10, 2008
Secretary of State

Entity Name: THE BLUFFS PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3201 BLUFFS DRIVE
LARGO, FL 33770 US

New Principal Place of Business:

Current Mailing Address:

3201 BLUFFS DRIVE
LARGO, FL 33770 US

New Mailing Address:

FEI Number: 59-2181625

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOSCARINO, JOHN P
3201 BLUFFS DRIVE
LARGO, FL 33770 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: P () Delete
Name: BOSCARINO, JOHN P
Address: 3201 BLUFFS DRIVE
City-St-Zip: LARGO, FL 33770

Title: VP () Delete
Name: VALDEZ, JOSE
Address: 707 GROVEWOOD LANE
City-St-Zip: LARGO, FL 33770

Title: T () Delete
Name: HIRT, CHARLES
Address: 606 GROVEWOOD LANE
City-St-Zip: LARGO, FL 33770

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:

I hereby certify that the information supplied with this filing does not qualify 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: JOHN P BOSCARINO, PRESIDENT BLUFF POA

MR.

04/10/2008

Electronic Signature of Signing Officer or Director

Date