

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90436 048 ****61.25

DOCUMENT # 757992

1. Entity Name

BORDEAUX VILLAGE ASSOCIATION, NO. 3, INC.



Principal Place of Business

13602 FRIGATE CT
#N-103
CLEARWATER FL 33762
US

Mailing Address

13602 FRIGATE CT
#N-103
CLEARWATER FL 33762
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-2118161

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CONDOMINIUM ASSOCIATES
3001 EXECUTIVE DR., #260
CLEARWATER FL 33762

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 reinstalling)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☒ NAME ☐ Delete
SNEDECKER, CLINTON
STREET ADDRESS 2480 PELICAN COURT UNIT R103
CITY-ST-ZIP CLEARWATER FL 33762

TITLE ☒ NAME ☐ Delete
WALL, BETH
STREET ADDRESS 13603 STORK COURT RD, P-202
CITY-ST-ZIP CLEARWATER FL 33762

TITLE ☒ NAME ☐ Delete
SWOOP, DAVID
STREET ADDRESS 2453 EGRET BLVD #0203
CITY-ST-ZIP CLEARWATER FL 33762

TITLE ☒ NAME ☐ Delete
LEWIS, NANCY
STREET ADDRESS 2450 PELICAN CT NO -101
CITY-ST-ZIP CLEARWATER FL 33762

TITLE ☐ NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ NAME ☐ Change ☐ Addition
STREET ADDRESS
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CITY-ST-ZIP

TITLE ☐ NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/07

727-572-9359

DATE PHONE #