

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760321

FILED
Mar 31, 2008
Secretary of State

Entity Name: SOUTH BOULEVARD TOWNHOUSES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6710 EMBASSY BLVD
204
PORT RICHEY, FL 34668 US

Current Mailing Address:

PO BOX 1407
PORT RICHEY, FL 34673 US

New Principal Place of Business:

5901 US HWY 19
SUITE 7 Q
NEW PORT RICHEY, FL 34652 US

New Mailing Address:

5901 US HWY 19
SUITE 7 Q
NEW PORT RICHEY, FL 34652 US

FEI Number: 59-2136706

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MYSZKOWIAK, MARY ANN
6710 EMBASSY BLVD
SUITE 204
PORT RICHEY, FL 34668 US

Name and Address of New Registered Agent:

QUALIFIED PROPERTY MANAGEMENT
5901 US HWY 19
SUITE 7Q
NEW PORT RICHEY, FL 34652 US

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: MARY WHITE

03/31/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PEARSON, CRAIG
Address: 6250 TENNESSEE AVENUE
City-St-Zip: NEW PORT RICHEY, FL 34653 US

Title: VPD (X) Delete
Name: LANE, KENDRA
Address: 5649 TOWNHOUSE DR
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: ST () Delete
Name: KING, JOANNE
Address: 6250 TENNESSEE AVE
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: REALI, SILVIO
Address: 5901 US HWY 19
City-St-Zip: NEW PORT RICHEY, FL 34652 US

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

Title: S (X) Change () Addition
Name: MCGINLEY, DEBBIE
Address: 5901 US HWY 19
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: T () Change (X) Addition
Name: BELLIZZI, BIAGIO
Address: 5901 US HWY 19
City-St-Zip: NEW PORT RICHEY, FL 34652

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: MARY WHITE

CEO

03/31/2008

Electronic Signature of Signing Officer or Director

Date