

**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 13, 2006 8:00 am**  
**Secretary of State**

01-23-2006 90119 002 \*\*\*\*61.25

**DOCUMENT # 763459**

1. Entity Name  
**TEN DOWNING STREET CONDOMINIUM ASSOCIATION,  
INC.**



Principal Place of Business  
**2311 14TH AVE W  
#105 - 34221  
PALMETTO MANATEE, FL 34221 US**

Mailing Address  
**4301-32ND ST  
A-20  
BRADENTON, FL 34205 US**

**DO NOT WRITE IN THIS SPACE**



01062006 No Chg-NP CR2E037 (11/05)

4. FEI Number  
**59-2702597**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**C & S CONDO MGMT SERV, INC.  
4301-32ND ST  
A-20  
BRADENTON, FL 34205**

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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 *Stacy Manager*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

*1-6-06*

**Filing Fee is \$81.25  
Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE	PD
NAME	SMOAK, PHILIP
STREET ADDRESS	2311 14TH AVE. W #201
CITY-ST-ZIP	PALMETTO, FL 34221
TITLE	80 VP'S
NAME	PRIEPOT, LYNDA
STREET ADDRESS	2311 14TH AVE. W. #206
CITY-ST-ZIP	PALMETTO, FL 34221
TITLE	D
NAME	Barry Kaskel
STREET ADDRESS	2311 14th Ave W
CITY-ST-ZIP	Palmetto, FL 34221
TITLE	T
NAME	Bob Wayne
STREET ADDRESS	2311 14th Ave W
CITY-ST-ZIP	Palmetto, FL 34221
TITLE	D
NAME	Nelson Smith
STREET ADDRESS	2311-14th Ave W
CITY-ST-ZIP	Palmetto, FL 34221
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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.

*Signature*  
*Robert Wayne*