

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 12, 2004 8:00 am
Secretary of State

02-12-2004 90037 045 ****61.25

DOCUMENT # 765152

1. Entity Name

305 SOUTH WESTLAND CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**305 S WESTLAND AVE., UNIT A
TAMPA FL 33606**

Mailing Address

**305 S WESTLAND AVE., UNIT A
TAMPA FL 33606**

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2234586

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**PULCINO, FRANK JR.
305 S WESTLAND AVE. A
TAMPA FL 33606**

7. Name and Address of New Registered Agent

Name **Karen A. Bishop**

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

305C Westland Ave. S.

Tampa

FL

Zip Code

33606

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 **Karen A. Bishop** **Karen A. Bishop**

2/2/04

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

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 **TSD** ☒ Delete
NAME **PULCINO, FRANK JR**
STREET ADDRESS **305 A S. WESTLAND AVE.**
CITY-ST-ZIP **TAMPA FL**

TITLE **VD** ☐ Delete
NAME **SUAREZ, NEAL F**
STREET ADDRESS **305 S WESTLAND AVE 'D'**
CITY-ST-ZIP **TAMPA FL**

TITLE **D** ☐ Delete
NAME **DRITZ, EDWINA**
STREET ADDRESS **305 S. WESTLAND AVE B**
CITY-ST-ZIP **TAMPA FL**

TITLE **PD** ☒ Delete
NAME **BISHOP, KAREN**
STREET ADDRESS **305 S WESTLAND AVE.**
CITY-ST-ZIP **TAMPA FL 33606**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PST** ☒ Change ☐ Addition
NAME **Karen A. Bishop**
STREET ADDRESS **305C Westland Ave. S.**
CITY-ST-ZIP **Tampa, FL 33606**

TITLE **D** ☒ Change ☐ Addition
NAME **Frank Pulcino**
STREET ADDRESS **305A Westland Ave. S.**
CITY-ST-ZIP **Tampa, FL 33606**

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

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

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NAME
STREET ADDRESS
CITY-ST-ZIP

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

12. I hereby certify that the information supplied with this filing does not qualify 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 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: **Karen A. Bishop** **Karen A. Bishop**

2/2/04

813-258-6045

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #