

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 16, 2003 8:00 am
Secretary of State

0047253

06-16-2003 90144 025 ****61.25

DOCUMENT # 765937

1. Entity Name

PASADENA COVE OWNERS' ASSOCIATION, INC.



Principal Place of Business

1320 PASADENA AVE S.
S. PASADENA FL 33713
US

Mailing Address

CONDOMINIUM ASSOCIATES
3001 EXECUTIVE DR #260
CLEARWATER FL 33762
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2299602**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CONDOMINIUM ASSOCIATES
3001 EXECUTIVE DR
STE 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 reinstating)

DATE

FILE NOW: FEE IS \$61.25

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JEFFORDS, RUTH	NAME	SUE HUNTER
STREET ADDRESS	1316 PASADENA AVE #5208	STREET ADDRESS	1304 PASADENA AVE # B
CITY-ST-ZIP	S PASADENA FL 33707	CITY-ST-ZIP	S. PASADENA, FL 33707
TITLE	<input checked="" type="checkbox"/> Delete	TITLE	P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RIDDLE, KEITH	NAME	
STREET ADDRESS	1332 PASADENA AVE 4607	STREET ADDRESS	
CITY-ST-ZIP	S PASADENA FL 33707	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JONES, BOB	NAME	
STREET ADDRESS	1328 PASADENA AVE 3606	STREET ADDRESS	
CITY-ST-ZIP	S PASADENA FL 33707	CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ANDERSON, BOB	NAME	BARB ELSON
STREET ADDRESS	1304 PASADENA AVE VILLA #9	STREET ADDRESS	1304 PASADENA AVE #10
CITY-ST-ZIP	S PASADENA FL 33707	CITY-ST-ZIP	S. PASADENA FL 33707
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILSON, JAYNE	NAME	
STREET ADDRESS	1320 PASADENA AVE 2604	STREET ADDRESS	
CITY-ST-ZIP	S PASADENA FL 33707	CITY-ST-ZIP	
TITLE	<input checked="" type="checkbox"/> Delete	TITLE	VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FERRARI, ANDY	NAME	
STREET ADDRESS	1320 PASADENA AVE #2603	STREET ADDRESS	
CITY-ST-ZIP	S PASADENA FL 33707	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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)