

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767090

FILED  
Mar 25, 2009  
Secretary of State

**Entity Name:** HEGRADO CONDOMINIUM ASSOCIATION OF ST. PETERSBURG, INC.

**Current Principal Place of Business:**

3729-13TH AVE N.  
104D  
SAINT PETERSBURG, FL 33710

**New Principal Place of Business:**

210 - 22ND AVE. NE  
SAINT PETERSBURG, FL 33714

**Current Mailing Address:**

P.O. BOX 47331  
SAINT PETERSBURG, FL 33743

**New Mailing Address:**

P.O. BOX 47351  
SAINT PETERSBURG, FL 33743

**FEI Number:** 90-0314604

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCOTT PROPERTY SERVICES, LLC  
5729 -13 AVE N #104D  
SAINT PETERSBURG, FL 33710 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MATINO, MICHAEL  
Address: 210-22ND AVE NE #15  
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: STD ( ) Delete  
Name: VORZIS, MARILYN  
Address: 1 BEACH DRIVE SE #1408  
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: SDTD ( ) Delete  
Name: VOREIS, MARILYN  
Address: 1 BEACH DR 2209  
City-St-Zip: SAINT PETERSBURG, FL 33701

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: MATINO, MICHAEL  
Address: 210 - 22ND AVE NE  
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: STD (X) Change ( ) Addition  
Name: VOREIS, MARILYN  
Address: 210 - 22ND AVE NE  
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: VPD (X) Change ( ) Addition  
Name: MICHEL, FRANCINE  
Address: 210 - 22 AVE NE  
City-St-Zip: SAINT PETERSBURG, FL 33704

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: SCOTT CELLAMARE

M

03/25/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date