

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 771183

FILED  
Mar 27, 2008  
Secretary of State

Entity Name: EUROPA OF COUNTRYSIDE, INC.

**Current Principal Place of Business:**

4151 WOODLANDS PARKWAY  
PALM HARBOR, FL 34685

**New Principal Place of Business:**

**Current Mailing Address:**

4151 WOODLANDS PARKWAY  
PALM HARBOR, FL 34685

**New Mailing Address:**

FEI Number: 59-2432741

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

REARDON, MAUREEN C  
4151 WOODLANDS PARKWAY  
PALM HARBOR, FL 34685 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: VPD ( ) Delete  
Name: STEVENS, RENEE  
Address: 2640 ENTERPRISE BLVD E, #B-11  
City-St-Zip: CLEARWATER, FL 33759

Title: TD ( ) Delete  
Name: KRZNARICH, STEVE  
Address: 2640 ENTERPRISE BLVD E, #B-23  
City-St-Zip: CLEARWATER, FL 33759

Title: SD ( ) Delete  
Name: FULLER, DONALD  
Address: 2640 ENTERPRISE RD E, #B-22  
City-St-Zip: CLEARWATER, FL 33759

Title: PD ( ) Delete  
Name: DEMARTE, DOMINIC  
Address: 2636 ENTERPRISE RD. E, #C-13  
City-St-Zip: CLEARWATER, FL 33759

Title: D ( ) Delete  
Name: REHKOPF, ARTIE  
Address: 2636 ENTERPRISE RD E, #C-14  
City-St-Zip: CLEARWATER, FL 33759

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

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

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

Title: SD (X) Change ( ) Addition  
Name: MCKITTRICK, STEPHEN  
Address: 2640 ENTERPRISE RD E, #B-24  
City-St-Zip: CLEARWATER, FL 33759

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

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

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: DOMINIC DEMARTE

PRES

03/27/2008

Electronic Signature of Signing Officer or Director

Date