2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

May 03, 2006 08:00 AM Secretary of State DOCUMENT # N00215 1. Entity Name COSMO CONDOMINIUM OWNER'S ASSOCIATION, INC. Principal Place of Business Mailing Address 7338 COQUINA WAY ST. PETERSBURG FL 33706 7338 COQUINE WAY ST. PETRSBURG BEACH FL 33706 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State Applied For City & State 4. FEI Number 59-3114055 Not Applie: Ζιρ Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PELDYS, GEORGE Street Address (P.O. Box Number is Not Acceptable) 7338 COQUINA WAY #5 ST PETERSBURG BEACH FL 33706 City 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 accerthe obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and tide if applicable (NOTE: Registered Agent signature renuired when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campalgn Financing Make Check Payable to \$5.00 May Be Due By May 1, 2006 Trust Fund Contribution Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PTD TITLE ☐ Delete THEF ☐ A. PELDYS, GEORGE NAME NAME 7338 COQUINA WAY #6 STREET ADDRESS STREET ADDRESS SAINT PETERSBURG FL 33706 CITY - ST- ZIP CITY-ST-ZIP 61.25 VD □ A! `` TITLE ☐ Delete TITLE Change PEARCE, DANIEL NAME 7338 COQUINAWAY #4 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ST PETE BEACH FL 33706 CITY-ST-ZIP SD TITLE ☐ Change ☐ Add ☐ Delete TITLE PELDYS, PATRICIA NAME NAME STREET ADDRESS 7338 COQUINA WAY #6 STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG FL 33706 CITY - ST - ZIP TITLE Delete TITLE Change ☐ Ait " NAME COYNE, DAVID NAME STREET ADDRESS 7338 COQUINA WAY #3 STREET ADDRESS CITY-ST-ZIP SAINT PETERSBURG FL 33706 CITY-ST-ZIP ☐ Defete TITLE [] Change □ Age NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP TOLE Delete TITLE Change Add NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 direction 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 1 if changed, or on an attachment with an address, with all other like empowered.