


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2005 8:00 am
Secretary of State

05-05-2005 90089 027 ****61.25

DOCUMENT # N01000008821					
1. Entity Name CENTURY HOME OWNERS ASSOCIATION, INC.					
Principal Place of Business 6735 54TH AVENUE NORTH, LOT #31 ST. PETERSBURG, FL 33709			Mailing Address 6735 54TH AVENUE NORTH, LOT #31 ST. PETERSBURG, FL 33709		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
ZANDER, DOROTHY R 6735 54TH AVE LOT# 31 SAINT PETERSBURG, FL 33709				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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small> DATE _____					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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		
TITLE	P	<input checked="" type="checkbox"/> Delete	TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GAVIN, STEPHEN D		NAME	SENERCHIA, VITTORIO	
STREET ADDRESS	6735 54TH AVENUE NORTH, LOT 38		STREET ADDRESS	6735 54TH AVE. N. LOT 19	
CITY-ST-ZIP	SAINT PETERSBURG, FL 33709		CITY-ST-ZIP	ST. PETERSBURG, FL 33709	
TITLE	V	<input checked="" type="checkbox"/> Delete	TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SENERCHIA, VITTORIO		NAME	RICKETTS, DONNA	
STREET ADDRESS	6735 54TH AVENUE NORTH, LOT 19		STREET ADDRESS	6735 54TH AVE. N. LOT 84	
CITY-ST-ZIP	SAINT PETERSBURG, FL 33709		CITY-ST-ZIP	ST. PETERSBURG, FL 33709	
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILLER, JOHN M		NAME	RICKETTS, DONNA	
STREET ADDRESS	6735 54TH AVENUE NORTH, LOT 45		STREET ADDRESS	6735 54TH AVE. N. LOT 84	
CITY-ST-ZIP	SAINT PETERSBURG, FL 33709		CITY-ST-ZIP	ST. PETERSBURG, FL 33709	
TITLE	TD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZANDER, DOROTHY R		NAME		
STREET ADDRESS	6735 54TH AVENUE NORTH, LOT #31		STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG, FL 33709		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHASE, ETHEL		NAME		
STREET ADDRESS	6735 54TH AVENUE NORTH, LOT 64		STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG, FL 33709		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	POMROY, RONALD		NAME		
STREET ADDRESS	6735 54TH AVE., LOT#10		STREET ADDRESS		
CITY-ST-ZIP	ST. PETERSBURG, FL 33709		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: <u>Dorothy R. Zander</u>			SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: <u>DOROTHY R. ZANDER</u>		
			Date: <u>4/8/05</u> Daytime Phone #: <u>727-541-3458</u>		



01062005 Chg-NP CR2E037 (10/03)

4. FEI Number
73-1632259

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

FL

Zip Code

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

727-541-3458

ATTACHMENT

40082774

CENTURY HOME OWNERS ASSOCIATION, INC.

ATTACHMENT TO DOCUMENT #NO 1000008821

April 8, 2005

ADDITIONAL DIRECTOR:

GAVIN, STEVEN
6735 54th Ave. N. Lot 36
ST. PETERSBURG, FL 33709