


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

FILED
Apr 07, 2003 8:00 am
Secretary of State

04-07-2003 90939 043 ****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
Suite, Apt. #, etc.
City & State

3. Mailing Address
Suite, Apt. #, etc.
City & State



CHECK HERE IF MAKING CHANGES

4. FEI Number **73-1632259**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

ZANDER, DOROTHY R
6735 54TH AVE
LOT# 31
SAINT PETERSBURG FL 33709

7. Name and Address of New Registered Agent

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

TITLE	P	<input type="checkbox"/> Delete
NAME	CHASE, ETHEL M	
STREET ADDRESS	6735 54TH AVE. N, LOT#64	
CITY-ST-ZIP	SAINT PETERSBURG FL 33709	
TITLE	V	<input type="checkbox"/> Delete
NAME	STEARNS, WILLIAM G	
STREET ADDRESS	6735 54TH AVE N., LOT#53	
CITY-ST-ZIP	SAINT PETERSBURG FL 33709	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	HARGRAVE, CAROLYN	
STREET ADDRESS	6735 54TH AVE. N., LOT #59	
CITY-ST-ZIP	ST. PETERSBURG FL 33709	
TITLE	TD	<input type="checkbox"/> Delete
NAME	ZANDER, DOROTHY R	
STREET ADDRESS	6735 54TH AVENUE NORTH, LOT #31	
CITY-ST-ZIP	ST. PETERSBURG FL 33709	
TITLE	D	<input type="checkbox"/> Delete
NAME	SHANKS, LUCILLE	
STREET ADDRESS	6735 54TH AVE. N., LOT#49	
CITY-ST-ZIP	ST. PETERSBURG FL 33709	
TITLE	D	<input type="checkbox"/> Delete
NAME	POMROY, RONALD	
STREET ADDRESS	6735 54TH AVE., LOT#10	
CITY-ST-ZIP	ST. PETERSBURG FL 33709	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLIAMS, BEVERLY	
STREET ADDRESS	6735 54th AVE. N. LOT #82	
CITY-ST-ZIP	ST. PETERSBURG, FL. 33709	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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]* **4/4/03** **727-54-3458**

CR2E037 (10/02)

CENTURY HOME OWNERS ASSOCIATION, INC.

April 1, 2003

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Additional Directors:

D

Bowser, Edward O.
6735 54th Ave. No. Lot 83
St. Petersburg, Fl. 33709

D

Piper, Merle
6735 54th Ave. Lot 32
St. Petersburg, Fl. 33709