2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 07, 2008 8:00 am Secretary of State

1. Entity Nam	MENT # N02000000 EST COMMUNITY ASSOC		-07-2008 90029		1.25			
Principal Place of Business 4131 GUNN HWY TAMPA, FL 33618 Mailing Address 4131 GUNN HWY TAMPA, FL 33618				400402				
<u> </u>	ace of Business - No P.O. Box #	3. Mailing Address Suite, Apt. #, etc.						
Suite, Apt. #, etc.				01072008 Chg	-NP CR2E	037 (12/06)		
City & State		City & State		4. FEI Number 04-3626900	4. FEI Number Applied For 04-3626900 Not Applicable			
Zip	Country	Zip	Country	5. Certificate of State	us Desired	\$8.75 Addi Fee Required		
	6. Name and Address of Current	7. Name and Addre	ess of New Registers	d /\gent				
DEFURIO, JAMES 201 E. KENNEDY BLVD SUITE 1406 TAMPA, FL 33602				Name Rolando Santiago RJS Law Group Street 240 Apollo Beach Bivd Apollo Beach, FL 33572				
			City		F	Zip Code)	
8. The above named entity submits this statement of the purpose of changing its registered affice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent SIGNATURE Signature, hood or sched name of registered form and tilly a spokcable. (NOTE: Regatered Agent signature required when reinstating) DATE								
Filling Fee Is \$61.25 9. Election Campaign Fi Due by May 1, 2008 Trust Fund Contribution				Sing \$5.00 May Be Added to Fees Horida Department of State				
10.	OFFICERS AND DIF		11.	ADDITIONS/CHANGES	S TO OFFICERS AND	DIRECTORS IN		
NAME STREET ADDRESS CITY-ST-ZIP	PD DEPPERT, DENNIS 11555 CAPTIVA KAY DRIVE RIVERVIEW, FL 33569	A Oelete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV Mazza, Arthur 11412 Captiva Kay Dr Riverview, FL 33569		☐ Change	Addition	
TITLE NAME STREET ADORESS CITY-ST-ZIP	VD HERNANDEZ, LISA 11644 CREST CREEK DR RIVERVIEW, FL 33569	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Lisa Fernandez 11644 Crest Creek Dr Riverview, FL 33569		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KERR, TANIA 11603 BAYLOR CT RIVERVIEW, FL 33569	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CASTELLINI, ROBERT 11003 STONE BRANCH DR RIVERVIEW, FL 33569	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT Doherty, Linda 11466 Captiva Kay Dr Riverview, FL 33569		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEREZ, HECTOR 10920 WINTERCREST DR RIVERVIEW, FL 33569	⊯ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Urbano, Maria 1426 Maximillan Dr Wesley Chapel, FL 33543	3	☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP		**************************************	☐ Change	ſ	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under cettly, 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.								