

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000540

FILED  
May 01, 2007  
Secretary of State

**Entity Name:** LAKE MAGGIORE SHORES NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

1434 23RD AVE SOUTH  
ST. PETERSBURG, FL 33705

**New Principal Place of Business:**

**Current Mailing Address:**

1434 23RD AVE SOUTH  
ST. PETERSBURG, FL 33705

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

DARLING, BERNICE  
1434 23RD AVE SOUTH  
ST. PETERSBURG, FL 33705 US

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: PD ( ) Delete  
Name: DARLING, BERNICE  
Address: 1434 23RD AVE SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33705

Title: VD ( ) Delete  
Name: BATES, VIOLA  
Address: 1520-26TH AVE. SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33705

Title: TD ( ) Delete  
Name: SANDERS, DEBORAH  
Address: 2309-13TH ST SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33705

Title: SD ( ) Delete  
Name: PORTER, DAPHNE  
Address: 1301-26TH AVE. SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33705

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

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

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

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: BERNICE DARLING

PRES

05/01/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date