

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 06, 2007 8:00 am**  
**Secretary of State**

04-06-2007 90043 044 \*\*\*\*61.25

<b>DOCUMENT # N02000003173</b> 1. Entity Name <b>BUCKINGHAM AT TAMPA PALMS OWNERS ASSOCIATION, INC.</b>			
Principal Place of Business <b>1050 S ELW PKWY OLDSMAR, FL 34677</b>		Mailing Address <b>1050 S ELW PKWY OLDSMAR, FL 34677</b>	
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc		3. Mailing Address	
City & State <b>720 Brooker Creek Blvd. #206 Oldsmar, FL 34677</b>		Country	
Zip <b>34677</b>		4. FEI Number <b>74-3113861</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>SCANNAVINO, INC 1050 A ELW PKWY OLDSMAR, FL 34677</b>		7. Name and Address of New Registered Agent Name <b>Scannavino, Inc.</b> Street Add <b>720 Brooker Creek Blvd. #206</b> City <b>Oldsmar, FL 34677</b>	
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, the registered agent. <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;">           SIGNATURE: <i>Dominick Scannavino</i>  <b>DOMINICK SCANNAVINO</b> </div> <div style="width: 40%; text-align: center;"> <small>(NOTE: Registered Agent signature required when reinstating)</small> </div> <div style="width: 20%; text-align: right;"> <small>DATE</small> </div> </div>			
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>			
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D O'SHEA, MARILYN 16167 GOLDSTAR PALMS DR TAMPA, FL 33647 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BANDOW, TIM 16170 COLCHESTER PALMS DR. TAMPA, FL 33647 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAMMER, RICHARD 6606 NEWPORT PALMS CT TAMPA, FL 33647 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LILLY, MICHAEL 15203 VESTRALRISE DR LITHIA, FL 33547 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TRIOTIS, ANDREAS 16128 COLCHESTER PALMS DR. TAMPA, FL 33647 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 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: <i>Timothy Bandow</i> <b>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</b>		Date <b>3/21/07</b>	
Daytime Phone # <b>813-972-4168</b>			