

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90300 008 ****61.25

DOCUMENT # N02000004062

1. Entity Name

UNIVERSITY GROVE OFFICE PARK OWNER'S
ASSOCIATION, INC.



Principal Place of Business

Mailing Address

2880 SCHERER DR #840
SAINT PETERSBURG FL 33716

2880 SCHERER DR #840
SAINT PETERSBURG FL 33716

40010150



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.
#100

Suite, Apt. #, etc.
#100

City & State
St Pete FL

City & State
St Pete FL

Zip
33716

Country

Zip
33716

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

03-0449589

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

✓ MINCEY, DONALD R.
1336 WEST FLETCHER AVENUE
TAMPA FL 33612

✓ Name Scott R Shaw
Street Address (P.O. Box Number is Not Acceptable)
13327 N 56TH ST
City TAMPA FL Zip Code 33617

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P
NAME SHAW, SCOTT
STREET ADDRESS 13337 N 56TH ST
CITY-ST-ZIP TAMPA FL 33617 ☐ Delete

TITLE
NAME SHAW ☒ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE V
NAME BEYER PAUL
STREET ADDRESS 13349 N 56TH ST
CITY-ST-ZIP TAMPA FL 33617 ☐ Delete

TITLE
NAME BEYER ☒ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME KLEBSY, LINDA
STREET ADDRESS 13325 N 56TH ST
CITY-ST-ZIP TAMPA FL 33617 ☐ Delete

TITLE
NAME KLEBSY ☒ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME HASAN, ASEUR
STREET ADDRESS 16123 ANCROFT COURT
CITY-ST-ZIP TAMPA FL 33647 ☒ Delete

TITLE D
NAME VAREQUEZ, Edgardo
STREET ADDRESS 13343 N. 56TH STREET
CITY-ST-ZIP TAMPA, FL 33617 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: X

4/14/06

813-786-4889