

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 06, 2004 8:00 am**  
**Secretary of State**

07-06-2004 90007 022 \*\*\*\*\*61.25

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07012004 Chg-NP CR2E037 (10/03)

<b>DOCUMENT # N02000007592</b> 1. Entity Name <b>UNITED COMMUNITY ASSOCIATIONS OF PINELLAS, INC.</b>					
Principal Place of Business <b>4361 45TH STREET NORTH LEALMAN, FL 33714</b>			Mailing Address <b>4361 45TH STREET NORTH LEALMAN, FL 33714</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>52-2367498</b>	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>NERI, RAY 4361 45TH STREET NORTH LEALMAN, FL 33714</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b></span> 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>Filing Fee is \$61.25 Due by September 8, 2004</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	PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>NERI, RAY</b>		NAME		
STREET ADDRESS	<b>4361 45TH STREET NORTH</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>LEALMAN, FL 33714</b>		CITY-ST-ZIP		
TITLE	VD	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>FISHER, SCOTT</b>		NAME		
STREET ADDRESS	<b>507 11TH STREET</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>PALM HARBOR, FL 34683</b>		CITY-ST-ZIP		
TITLE	AVD	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>FRANK, JOHN</b>		NAME	<b>FRANK, JOHN</b>	
STREET ADDRESS	<b>3837 44 AVE N</b>		STREET ADDRESS	<b>3837 44 AVE N</b>	
CITY-ST-ZIP	<b>LEALMAN, FL 33714</b>		CITY-ST-ZIP	<b>LEALMAN, FL 33714</b>	
TITLE	TD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>REDMAN, AL</b>		NAME		
STREET ADDRESS	<b>12112 KAY DR.</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>SEMINOLE, FL 33772</b>		CITY-ST-ZIP		
TITLE	SD	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>RAJA, GERI</b>		NAME		
STREET ADDRESS	<b>501 LAGUANA DR.</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>TIERRA VERDE, FL 33715</b>		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			NAME	<b>ISRAEL, SALLY</b>	
STREET ADDRESS			STREET ADDRESS	<b>2615 DOLPHIN BLDG S.</b>	
CITY-ST-ZIP			CITY-ST-ZIP	<b>ST. PETE, FL 33707</b>	
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 endorsements.					
<b>SIGNATURE: <i>Raymond H. Neri</i></b> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			<b>July 1, 2004</b> Date		
			<b>727-527-5352</b> Daytime Phone #		