

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007592

FILED  
Feb 11, 2008  
Secretary of State

**Entity Name:** UNITED COMMUNITY ASSOCIATIONS OF PINELLAS, INC.

**Current Principal Place of Business:**

4361 45TH STREET NORTH  
LEALMAN, FL 33714

**New Principal Place of Business:**

**Current Mailing Address:**

4361 45TH STREET NORTH  
LEALMAN, FL 33714

**New Mailing Address:**

**FEI Number:** 52-2367498

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NERI, RAY  
4361 45TH STREET NORTH  
LEALMAN, FL 33714 US

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

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: NERI, RAY  
Address: 4361 45TH STREET NORTH  
City-St-Zip: LEALMAN, FL 33714

Title: SDTD ( ) Delete  
Name: ISRAEL, SALLY  
Address: 2015 DOLPHIN BLDG S.  
City-St-Zip: SAINT PETERSBURG, FL 33707

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: PD (X) Change ( ) Addition  
Name: NERI, RAY  
Address: 4361 45TH STREET NORTH  
City-St-Zip: LEALMAN, FL 33714 US

Title: VPD (X) Change ( ) Addition  
Name: HEBERT, ARTHUR  
Address: 10633 FRANCIS LANE  
City-St-Zip: SEMINOLE, FL 33772 US

Title: SD ( ) Change (X) Addition  
Name: BOOTIER, BETTY  
Address: 11589 87TH AVE N  
City-St-Zip: SEMINOLE, FL 33772

Title: TD ( ) Change (X) Addition  
Name: MILLER, DOROTHY  
Address: 11734 88TH AVE N  
City-St-Zip: SEMINOLE, FL 33772

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: RAYMOND H. NERI

PRES

02/11/2008

Electronic Signature of Signing Officer or Director

Date