

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000873

FILED
Mar 22, 2005
Secretary of State

Entity Name: ARLINGTON TERRACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8640 SEMINOLE BLVD.
SEMINOLE, FL 33772

New Principal Place of Business:

340 4TH STREET SOUTH
ST. PETERSBURG, FL 33701

Current Mailing Address:

P.O. BOX 2085
ST. PETERSBURG, FL 33731

New Mailing Address:

FEI Number: 06-1678745 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOFSTRA, PETER T
8640 SEMINOLE BLVD.
SEMINOLE, FL 33772 US

Name and Address of New Registered Agent:

BUTCHER, SIMON M
340 4TH STREET SOUTH
APT. #1
ST. PETERSBURG, FL 33701 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: SIMON M. BUTCHER

03/22/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MANCINELLI, PAUL M
Address: 237 - 7TH AVENUE N., #2
City-St-Zip: ST. PETERSBURG, FL 33701

Title: VD () Delete
Name: MANCINELLI, YOLANDA
Address: 237 - 7TH AVENUE N., #2
City-St-Zip: ST. PETERSBURG, FL 33701

Title: STD () Delete
Name: MANCINELLI, RHONDA
Address: 237 - 7TH AVENUE N., #2
City-St-Zip: ST. PETERSBURG, FL 33701

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BUTCHER, SIMON M
Address: 340 4TH STREET SOUTH, APT. #1
City-St-Zip: ST. PETERSBURG, FL 33701

Title: VD (X) Change () Addition
Name: PAULUS, CAREY
Address: 340 4TH STREET SOUTH, APT. #4
City-St-Zip: ST. PETERSBURG, FL 33701

Title: STD (X) Change () Addition
Name: STONE, LARRY L
Address: 340 4TH STREET SOUTH, APT. #3
City-St-Zip: ST. PETERSBURG, FL 33701

Title: D () Change (X) Addition
Name: KENEDI, AARON
Address: 222 E 3RD STREET 4D
City-St-Zip: NY, NY 10009

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SIMON M. BUTCHER

PD

03/22/2005

Electronic Signature of Signing Officer or Director

Date