

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2008 8:00 am
Secretary of State

05-05-2008 90247 012 ****61.25

DOCUMENT # N03000004259 1. Entity Name VICTORIA PARK SOHO HOMEOWNERS ASSOCIATION, INC.		 APR 29 2008	
Principal Place of Business 9887 FOURTH STREET NORTH- SUITE #301 ST. PETERSBURG, FL 33702		Mailing Address 9887 FOURTH STREET NORTH- SUITE #301 ST. PETERSBURG, FL 33702	
2. Principal Place of Business - No P.O. Box # 3001 Executive Dr. Suite 260		3. Mailing Address 3001 Executive Dr. Suite 260	
City & State Clearwater, FL		City & State Clearwater, FL	
Zip 33762		Zip 33762	
Country Pinellas		Country Pinellas	
4. FEI Number 11-3690720		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RAMPART PROPERTIES, INC. 9887 FOURTH STREET NORTH SUITE #301 ST. PETERSBURG, FL 33702			
7. Name and Address of New Registered Agent Name Condominium Associates Street Address (P.O. Box Number is Not Acceptable) 3001 Executive Dr. Suite 260 City Clearwater FL Zip Code 33762			
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 By C. D. Caldwell, VICE PRES. DATE 4-30-08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FORTE, JEFF <input checked="" type="checkbox"/> Delete 9887 FOURTH STREET NORTH #301 ST. PETERSBURG, FL 33702		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD - P NEWMAN, CRAIG <input type="checkbox"/> Delete 9887 FOURTH STREET NORTH #301 ST. PETERSBURG, FL 33702		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD SILVER, TOM <input type="checkbox"/> Delete 9887 FOURTH STREET NORTH #301 ST. PETERSBURG, FL 33702		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT 20E MARNOT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 2407 VICTORIA BARKERS LN. TAMPA FLA 33609		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CRAIG NEWMAN <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2421 VICTORIA BARKERS LN TAMPA FLA 33609		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD SILVER, TOM <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2417 VICTORIA BARKERS LN TAMPA FLA 33609		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
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"/> 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: X CRAIG A. NEWMAN, DC 83875-6539 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			