

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008583

FILED
Apr 02, 2008
Secretary of State

Entity Name: DISSTON ARMS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

5150 - 10TH AVE. N & 5155 - 9TH AVE. N
ST. PETERSBURG, FL 33710 US

New Principal Place of Business:

5150 - 10TH AVE. N & 5155 - 9TH AVE. N
ST. PETERSBURG, FL 33710 US

Current Mailing Address:

C/O RESOURCE PROERTY MGMT
7300 PARK STREET
SEMINOLE, FL 33777 US

New Mailing Address:

FEI Number: 59-1626214 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

RESOURCE PROPERTY MANAGEMENT
7300 PARK STREET
SEMINOLE, FL 33777 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: P () Delete
Name: MACNEIL, ELIZABETH
Address: 5155 - 9TH AVE. NORTH #104B
City-St-Zip: ST. PETERSBURG, FL 33710

Title: VP () Delete
Name: REPKA, MIKE
Address: 5150 - 10TH AVE. NORTH #211A
City-St-Zip: ST PETERSBURG, FL 33710

Title: S () Delete
Name: BARNES, MARK
Address: 5155 - 9TH AVE. NORTH #102B
City-St-Zip: ST. PETERSBURG, FL 33710

Title: T () Delete
Name: KLEIM, DOUG
Address: 5155 - 9TH AVE. NORTH #302B
City-St-Zip: ST. PETERSBURG, FL 33710

Title: D () Delete
Name: DAVIS, TIM
Address: 5155 - 9TH AVE. NORTH #206B
City-St-Zip: ST. PETERSBURG, FL 33710

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MACNEAL, ELIZABETH
Address: 5155 - 9TH AVE. NORTH #104B
City-St-Zip: ST. PETERSBURG, FL 33710

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ELIZABETH MACNEAL

P/D

04/02/2008

Electronic Signature of Signing Officer or Director

Date