

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03360

FILED  
May 04, 2009  
Secretary of State

**Entity Name:** VICEROY CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

8520 GOVERNMENT DR.  
STE. 1  
NEW PORT RICHEY, FL 34654

**New Principal Place of Business:**

**Current Mailing Address:**

4200 MCCLUNG DR.  
NEW PORT RICHEY, FL 34653

**New Mailing Address:**

**FEI Number:** 59-2566999      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

FERRANDINO, JOSEPH P  
4200 MCCLUNG DR.  
NEW PORT RICHEY, FL 34653      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: FERRANDINO, JOSEPH P  
Address: 4200 MCCLUNG DR.  
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: VD      ( ) Delete  
Name: KALOGIANIS, CONSTANTINE  
Address: 4821 US HWY. 19, STE. 3  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: SD      ( ) Delete  
Name: KALOGIANIS, KATHY  
Address: 4821 US HWY. 19, STE. 3  
City-St-Zip: NEW PORT RICHEY, FL 34652

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

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

Title:      ( ) Change ( ) Addition  
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: JOSEPH P FERRANDINO

MGR

05/04/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date