

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 8:00 am
Secretary of State

04-16-2007 90051 037 ****61.25

DOCUMENT # N04000003923 1. Entity Name WESTSHORE TOWNHOMES PROPERTY OWNERS ASSOCIATION, INC.					
Principal Place of Business 3001 EXECUTIVE DR SUITE 260 CLEARWATER, FL 33762			Mailing Address 3001 EXECUTIVE DR SUITE 260 CLEARWATER, FL 33762		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 20-1939504	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DRIVE SUITE 260 CLEARWATER, FL 33762				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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: _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HILL, CHRISTOPHER 5305 ESCENA COURT TAMPA, FL 33611	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Odell, Patrick 4713 Jennings Bay Tampa, FL 33611	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BONANNO, BRIAN 5315 ESCENA COURT TAMPA, FL 33611	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Phillips, Travis 5315 Escena Ct Tampa, FL 33611	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CERVI, JOSHUA 5314 ESCENA COURT TAMPA, FL 33611	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Gronke, Christine 4707 Jennings Bay Tampa, FL 33611	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MARTIN, NED 5303 POINT PLEASANT LANE TAMPA, FL 33611	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Alfonso, Yordan 5317 Escena Ct Tampa, FL 33611	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ 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: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date: 4-5-07 Daytime Phone #: 813-872-6610		