

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000012064

FILED
Jan 24, 2009
Secretary of State

Entity Name: FIFTH AVENUE VILLAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2002 5TH AVE, # 213
TAMPA, FL 333605

New Principal Place of Business:

Current Mailing Address:

PO BOX 76396
TAMPA, FL 33675

New Mailing Address:

FEI Number: 59-3794762

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNUEPPEL, THOMAS C
2002 E 5TH AVE # 213
TAMPA, FL 33605 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: LAMEIER, SCOTT
Address: 3903 NAPPA PLACE
City-St-Zip: VALRICO, FL 33594

Title: VP () Delete
Name: PARDUE, JOSHUA
Address: 2002 E 5TH AVENUE # 201
City-St-Zip: TAMPA, 33 33594

Title: S () Delete
Name: YTURRIAGA, STEVE
Address: 2002 E 5TH AVENUE # 108
City-St-Zip: TAMPA, FL 33605

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: YTURRIAGA, STEVE
Address: 2002 E 5TH AVENUE # 108
City-St-Zip: TAMPA, 33 33605

Title: S (X) Change () Addition
Name: CELORIA, JOHN
Address: 2002 E 5TH AVENUE # 301
City-St-Zip: TAMPA, FL 33605

Title: T () Change (X) Addition
Name: CASEY, TIM
Address: 2411 HIBISCUS BAY LANE
City-St-Zip: BRANDON, FL 33511

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: THOMAS C. KNUEPPEL

MGR

01/24/2009

Electronic Signature of Signing Officer or Director

Date