

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90384 003 ****61.25

DOCUMENT # N04289

1. Entity Name

ST. TROPEZ CONDOMINIUM IV ASSOCIATION, INC.



Principal Place of Business

2880 SCHERER DRIVE., SUITE 840
ST PETERSBURG FL 33716

Mailing Address

2880 SCHERER DRIVE., SUITE 840
ST PETERSBURG FL 33716

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2425998

Applied For

Not Applicable

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

CIANFRONE, JOE PA
1968 BAYSHORE BLVD
DUNEDIN FL 34698

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

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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 **TTCS** ☐ Delete
NAME CERELLA, ANNETTE
STREET ADDRESS 3455 COUNTRYSIDE BLVD # 49
CITY-ST-ZIP CLEARWATER FL 33761

TITLE **TD** ☐ Change ☐ Addition
NAME CLARK, BILL
STREET ADDRESS 3455 COUNTRYSIDE BLVD #50
CITY-ST-ZIP CLEARWATER FL 34621

TITLE **D** ☐ Delete
NAME CLARK, BILL
STREET ADDRESS 3455 COUNTRYSIDE BLVD #50
CITY-ST-ZIP CLEARWATER FL 34621

TITLE **D** ☐ Change ☐ Addition
NAME CLARK, BILL
STREET ADDRESS 3455 COUNTRYSIDE BLVD #50
CITY-ST-ZIP CLEARWATER FL 34621

TITLE **D** ☒ Delete
NAME MORGAN, BARBARA
STREET ADDRESS 3455 COUNTRYSIDE BLVD # 67
CITY-ST-ZIP CLEARWATER FL 34621

TITLE **President** ☐ Change ☒ Addition
NAME Mike Caputi
STREET ADDRESS 3455 Countryside Blvd 470
CITY-ST-ZIP Clearwater FL 34621

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

Daytime Phone #