## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04924

FILED Apr 26, 2005 Secretary of State

Entity Name: COBB'S LANDING COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

RAMPART PROPERTIES, INC 10033 9TH STREET N., 2ND FLOOR SAINT PETERSBURG, FL 33716 US

Current Mailing Address: New Mailing Address:

RAMPART PROPERTIES, INC 10033 9TH STREET N., 2ND FLOOR SAINT PETERSBURG, FL 33716 US

FEI Number: 59-2449838 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SMITH, BRIAN RAMPART PROPERTIES 10033 9TH STREET N., 2ND FLOOR SAINT PETERSBURG, FL 33716 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:

Flateria Circular FD video I Arrel

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 TRAESTER, AVIS
 Name:
 WEBSTER, CINDY

 Address:
 10033 9TH STREET N., 2ND FLOOR
 Address:
 10033 9TH STREET N., 2ND FLOOR

 City-St-Zip:
 SAINT PETERSBURG, FL 33716
 City-St-Zip:
 SAINT PETERSBURG, FL 33716

Title: VPD ( ) Delete Title: VPD (X) Change ( ) Addition

Name: BRADSHAW, CLYDE Name: TRBOVICH, PAM

Address: 10033 NINTH STREET NORTH Address: 10033 NINTH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 337163804 City-St-Zip: ST. PETERSBURG, FL 337163804

Title: STD ( ) Delete Title: STD (X) Change ( ) Addition

Name: TRBOVICH, PAM Name: FELDSHUE, ALAN

Address: 10033 NINTH STREET NORTH Address: 10033 NINTH STREET NORTH
City-St-Zip: SAINT PETERSBURG, FL 33716 City-St-Zip: SAINT PETERSBURG, FL 33716

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CINDY WEBSTER PD 04/26/2005