

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011461

FILED  
Apr 26, 2007  
Secretary of State

**Entity Name:** REDINGTON SHORES YACHT & TENNIS ESTATES H.O.A., INC.

**Current Principal Place of Business:**

102 WEST WHITING STREET  
SUITE 300  
TAMPA, FL 33602

**New Principal Place of Business:**

2840 W BAY DRIVE  
#135  
BELLEAIR BLUFFS, FL 33770

**Current Mailing Address:**

102 WEST WHITING STREET  
SUITE 300  
TAMPA, FL 33602

**New Mailing Address:**

2840 W BAY DRIVE  
#135  
BELLEAIR BLUFFS, FL 33770

**FEI Number:** 20-4256979

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ARSENAULT, KENNETH G JR.  
10225 ULMERTON ROAD  
SUITE 2  
LARGO, FL 33771 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: PD ( ) Delete  
Name: DAGOSTINO, FRANK  
Address: 102 WEST WHITING STREET SUITE 300  
City-St-Zip: TAMPA, FL 33602

Title: VD ( ) Delete  
Name: LYONS, ROBERT E  
Address: 102 WEST WHITING STREET SUITE 300  
City-St-Zip: TAMPA, FL 33602

Title: STD ( ) Delete  
Name: GIGLIO, RON  
Address: 102 WEST WHITING STREET SUITE 300  
City-St-Zip: TAMPA, FL 33602

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

Title: PD (X) Change ( ) Addition  
Name: DAGOSTINO, FRANK  
Address: 2840 W BAY DRIVE #135  
City-St-Zip: BELLEAIR BLUFFS, FL 33770

Title: VD (X) Change ( ) Addition  
Name: LYONS, ROBERT E  
Address: 2840 W BAY DRIVE #135  
City-St-Zip: BELLEAIR BLUFFS, FL 33770

Title: STD (X) Change ( ) Addition  
Name: GIGLIO, RON  
Address: 2840 W BAY DRIVE #135  
City-St-Zip: BELLEAIR BLUFFS, FL 33770

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: ROBERT E LYONS

VD

04/26/2007

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

\_\_\_\_\_  
Date