

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05654

FILED
Apr 08, 2008
Secretary of State

Entity Name: AMERICAN CONDOMINIUM PARKS-ZEPHYRHILLS, A CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

35136 CONDOMINIUM BLVD.
ZEPHYRHILLS, FL 33541

New Principal Place of Business:

Current Mailing Address:

35136 CONDOMINIUM BLVD.
ZEPHYRHILLS, FL 33541

New Mailing Address:

FEI Number: 59-2721252

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURPHY, DAVID J ATT.
GREENFELDER,MANDER,HANSON,MURPHY,& DWYER
14217 THIRD STREET
DADE CITY, FL 33525 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: NOVAK, GERRY
Address: 4913 BOBBY AVE.
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: SD () Delete
Name: KNOX, JULIE
Address: 35303 CONDO BLVD.
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: TD () Delete
Name: STONE, STUART
Address: 35238 DODIE DRIVE
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: VPD () Delete
Name: FONK, JOHN
Address: 35217 CONDO BLVD
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: VPD () Delete
Name: RIGOTTI, GENE
Address: 35116 CYNTHIA AVE
City-St-Zip: ZEPHYRHILLS, FL 33541

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FONK, JOHN
Address: 35217 CONDO BLVD.
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: SD (X) Change () Addition
Name: TAURIANEN, GENE
Address: 4753 BOBBY AVE.
City-St-Zip: ZEPHYRHILLS, FL 33541

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

Title: VPD (X) Change () Addition
Name: RIGOTTI, GENE
Address: 35116 CYNTHIA AVE.
City-St-Zip: ZEPHYRHILLS, FL 33541

Title: VPD (X) Change () Addition
Name: BRION, JOHN S
Address: 35254 DODIE DRIVE
City-St-Zip: ZEPHYRHILLS, FL 33541

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: JOHN FONK

PD

04/08/2008

Electronic Signature of Signing Officer or Director

Date