



2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2008 8:00 am
Secretary of State

02-11-2008 90058 049 ****61.25

| | | | | | |
|--|---|---|---|--|--|
| DOCUMENT # N06000010925 1. Entity Name 43RD STREET CONDOMINIUM ASSOCIATION, INC. | | | |  | |
| Principal Place of Business 11001 DANKA WAY NORTH UNIT 3 ST PETERSBURG, FL 33716 | | | Mailing Address 11001 DANKA WAY NORTH UNIT 3 ST PETERSBURG, FL 33716 | | |
| 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. | | 3. Mailing Address Suite, Apt. #, etc. | |  | |
| City & State Zip Country | | City & State Zip Country | | 4. FEI Number 20-8301150 | |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | | | | Applied For Not Applicable | |
| 6. Name and Address of Current Registered Agent HUMBARGER, JUDY K 11001 DANKA WAY NORTH UNIT 3 ST PETERSBURG, FL 33716 | | | 7. Name and Address of New Registered Agent 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small> | | | | | |
| Filing Fee is \$61.25 Due by May 1, 2008 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | | \$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 NAME STREET ADDRESS CITY-ST-ZIP | DP BARGER, MICHAEL E 11001 DANKA WAY NORTH UNIT 3 ST PETERSBURG, FL 33716 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP MONSALVE, JORGE 10451 66TH ST. N. PINELLAS PARK, FL 33782 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DTS HUMBARGER, JUDY K 11001 DANKA WAY NORTH UNIT 3 ST PETERSBURG, FL 33716 | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D BARGER, MICHAEL E., JR 10451 66TH ST. N. PINELLAS PARK, FL 33782 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D ROWAN, JAMES J 780 94TH AVE N #104 ST PETERSBURG, FL 33702 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D BAUMAN, BARBARA 2811 KIPPS COLONY DR. ST. PETERSBURG, FL 33707 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D CRANE, CYNTHIA A 780 94TH AVE N #104 ST PETERSBURG, FL 33702 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D PACHECO, JOCELYN 11001 DANKA WAY NORTH UNIT 3 ST PETERSBURG, FL 33716 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D PACHECO, JOCELYN 11001 DANKA WAY NORTH UNIT 3 ST PETERSBURG, FL 33716 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D PACHECO, JOCELYN 11001 DANKA WAY NORTH UNIT 3 ST PETERSBURG, FL 33716 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Judy K. Humbarger</i> | | | 2.4.08 727-520-7711 | | |
| <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | | | <small>Date Daytime Phone #</small> | | |