

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011946

FILED  
Apr 20, 2007  
Secretary of State

**Entity Name:** PASADENA POINTE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

3333 PASADENA AVENUE SOUTH  
SOUTH PASADENA, FL 33707

**New Principal Place of Business:**

**Current Mailing Address:**

3333 PASADENA AVENUE SOUTH  
SOUTH PASADENA, FL 33707

**New Mailing Address:**

**FEI Number:** 20-5910226

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHAH, RAXIT  
5901 SUN BOULEVARD  
SUITE 104  
ST PETERSBURG, FL 33715 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: D ( ) Delete  
Name: SHAH, RAXIT  
Address: 5901 SUN BOULEVARD, SUITE 104  
City-St-Zip: ST PETERSBURG, FL 33715

Title: D ( ) Delete  
Name: SHAH, KETKI  
Address: 5901 SUN BOULEVARD, SUITE 104  
City-St-Zip: ST PETERSBURG, FL 33715

Title: D ( ) Delete  
Name: SHAH, PUNIT  
Address: 5901 SUN BOULEVARD, SUITE 104  
City-St-Zip: ST PETERSBURG, FL 33715

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: RAXIT N. SHAH

D

04/20/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date