

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 22, 2008 8:00 am**  
**Secretary of State**

04-22-2008 90024 037 \*\*\*\*61.25

DOCUMENT # N09511

1. Entity Name  
STAMFORD VILLAGE CONDOMINIUM I ASSOCIATION,  
INC.



Principal Place of Business Mailing Address  
5901 U.S. 19 8249 Kristel Cir. 5901 U.S. 19 8249 Kristel Cir.  
SUITE 70 Port Richey, FL SUITE 70 Port Richey, FL  
NEW PORT RICHEY, FL 34652-1135 NEW PORT RICHEY, FL 34652-1135  
34668 34668



**DO NOT WRITE IN THIS SPACE**

02212008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2646948 Applied For Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Tampa Bay Property  
Management  
8249 Kristel Circle  
Port Richey, FL 34668

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

Filing Fee is \$61.25  
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	SD
NAME	JORGENSEN, GERRIE Mary Kampachroer
STREET ADDRESS	5901 U.S. 19, SUITE 70 4809 Wakefield Ct
CITY-ST-ZIP	NEW PORT RICHEY, FL 34652-1135 34655
TITLE	TD
NAME	MOLITOR, RUDY M Joseph Segreto
STREET ADDRESS	5901 U.S. 19, SUITE 70 9424 Rockbridge Ct
CITY-ST-ZIP	NEW PORT RICHEY, FL 34652-1135 34655
TITLE	VP
NAME	WIDMER, JEAN Pat Jack
STREET ADDRESS	5901 U.S. 19, SUITE 70 4813 Wakefield Ct.
CITY-ST-ZIP	NEW PORT RICHEY, FL 34652-1135 34655
TITLE	P
NAME	DALY, CAROLINE
STREET ADDRESS	5901 U.S. 19, SUITE 70 4746 Wakefield Ct.
CITY-ST-ZIP	NEW PORT RICHEY, FL 34652-1135 34655
TITLE	D
NAME	BRENNAN, ROSE Jennie Rachul
STREET ADDRESS	5901 U.S. 19, SUITE 70 4831 Wakefield Ct
CITY-ST-ZIP	NEW PORT RICHEY, FL 34652-1135 34655
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Caroline Daly 4/16/08  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #