

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10880

FILED
May 01, 2007
Secretary of State

Entity Name: ARRAWANA PARK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

201 S. ARRAWANA AVE.
APT. F
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

201 S. ARRAWANA AVE.
APT. F
TAMPA, FL 33609

New Mailing Address:

FEI Number: 59-2642336 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DEWITT, W. PAUL
201 S. ARRAWANA AVE.
APT. F
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

PAVLAKOS, STEPHANIE
201 S. ARRAWANA AVE.
APT. J
TAMPA, FL 33609 US

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: STEPHANIE PAVLAKOS

05/01/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: VESCHIO, VICTOR
Address: 201 S. ARRAWANA AVE. APT.A
City-St-Zip: TAMPA, FL 33609

Title: D () Delete
Name: DEWITT, PAUL E
Address: 201 S. ARRAWANA AVE. APT. F
City-St-Zip: TAMPA, FL 33609

Title: SD (X) Delete
Name: GARCIA, MARIA
Address: 201 S. ARRAWANA AVE. APT. I
City-St-Zip: TAMPA, FL 33609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: PAVLAKOS, STEPHANIE
Address: 201 S. ARRAWANA AVE. APT.J
City-St-Zip: TAMPA, FL 33609

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 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: STEPHANIE PAVLAKOS

PTD

05/01/2007

Electronic Signature of Signing Officer or Director

Date