## 2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## **FILED** Feb 11, 2004 8:00 am Secretary of State

1. Entity Nan	ne	# N11370 CONDOMIN		IATION, INC	<b>.</b>				02-1	1-2004	90023 (	007 ****6	51.25
Principal Place of Business 605 S. DAKOTA ST. BOX 13 TAMPA, FL 33606 US			605 S BOX 1	Mailing Address 605 S. DAKOTA ST. BOX 13 TAMPA, FL 33606 US				94UU4794					
2. Principal F	Place of Busin	3. Mailir	3. Mailing Address										
Suite, Apt. #, etc.			Suit	Suite, Apt. #, etc.				01072004	Chg-N	Р	CR2E0	37 (10/03)	
City & State			City	City & State				4. FEI Numb 59-273				<del></del>	oplied For of Applicable
Zip		Country	Zip		Co	untry		5. Certificate	of Status	Desired		\$8.75 Add Fee Require	
	6Name	and Address of C	urrent Registered	1 Agent			-	7. Name and	Address	of New F	Registered	Agent	
O'ROURK 605 S DAI #4 TAMPA, F			,					P.O. Box Numb		cceptable	e) 		
.,	_ 00000									Zip Cod			
	named entity tions of regist	y submits this state	rnent for the purpo	se of changing its	s register	ed office or	register		oth, in the S	tate of Fl	orida. I am		and accept
SIGNATURE	_ Pan	an Bu	mitein	Rua	B		1.	て:	: 65UC	0 5	Lic	ים מב/י	ų
SIGNATORE	Signature, typed	or printed name of registe	red agent and title if appli	cable. (NOT	E: Registere	ed Agent signatu	ure required	when reinstating)	. W > VI	<u></u>	DATE		
SIGNATORE	Filing Fe	e is \$61.25 lay 1, 2004	red agent and title it appli	9. Election Ca Trust Fund	mpaign f	Financing ;	ure required		Be	N		k payable t	
10.	Filing Fe	e is \$61.25 lay 1, 2004	red agent and title if appli	9. Election Ca Trust Fund	mpaign f	Financing ;		when reinstating) \$5.00 May I	Be ;	N Flor	rida Depa	rtment of S	tate
1	Filing Fe Due by M	e is \$61.25 lay 1, 2004		9. Election Ca	mpaign f	Financing ;	□ . A	\$5.00 May I Added to Fees	Be HANGES TO	Floi OFFICE	rida Depa	rtment of S	tate
10.	Filing Fe Due by M	e is \$61,25 lay 1, 2004 OFFICERS A E, STEVE KOTA AVE #4		9. Election Ca Trust Fund	mpaign F Contribut 11. TITL NAM STRI	Financing (	PD Chr 60	\$5.00 May In Added to Fees ADDITIONS/CH	HANGES TO	O OFFICE	RS AND D	RECTORS IN	tate
10. TITLE NAME STREET ADDRESS	PD O'ROURK 605 S DAI TAMPA, F	e is \$61.25 lay 1, 2004 OFFICERS A E, STEVE COTA AVE #4 IL 33606 EIN, RYAN COTA AVE #2		9. Election Ca Trust Fund	mpaign in Contribut  11.  TITL NAM STRI CITY TITL NAM STRI	E AE EET ADDRESS /-ST-ZIP	PD Chr 60	\$5.00 May I Added to Fees	HANGES TO	O OFFICE	RS AND D	RECTORS IN	tate
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD O'ROURK 605 S DAI TAMPA, F TD BERNSTE 605 S DAI TAMPA, F VD KENNA, F	e is \$61.25 lay 1, 2004  OFFICERS A  E, STEVE  KOTA AVE #4  L 33606  EIN, RYAN  KOTA AVE #2  L 33606  PETERSON  KOTA AVE #4		9. Election Ca Trust Fund	mpaign / Contribut  11.  HITL NAM STRI CITY TITL NAM STRI STRI	E RE EET ADDRESS /-ST-ZIP E AE EET ADDRESS (-ST-ZIP E	PD Chr 60	\$5.00 May In Added to Fees ADDITIONS/CH	HANGES TO	O OFFICE	RS AND D	RECTORS IN Change	tate 1 10 Addition
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD O'ROURK 605 S DAI TAMPA, F OS S DAI TAMPA, F VD KENNA, F 603 S DAI TAMPA, F SD ROLLINS,	e is \$61.25 lay 1, 2004  OFFICERS A  E, STEVE  COTA AVE #4 L 33606  EIN, RYAN  COTA AVE #2 L 33606  PETERSON  COTA AVE #4 L 33606  MARY PAT  COTA AVE #6		9. Election Ca Trust Fund Delete	mpaign / Contribut  11.  HITL  NAM  STRI  CITY  TITL  NAM  STRI  STRI  CITY  TITL  NAM  STRI  STRI  CITY  TITL  NAM  STRI	E ALE EET ADDRESS (-ST-ZIP E	PD Chr 60	\$5.00 May In Added to Fees ADDITIONS/CH	HANGES TO	O OFFICE	RS AND D	RECTORS IN Change	tate 10 Addition
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I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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: Payon Bernstein Ryan Bernstein	1/10/04	813-487-5510
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #