


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2005 08:00 AM
Secretary of State

DOCUMENT # N11781			
1. Entity Name THE YBOR CITY BUSINESS CONDOMINIUM OWNER'S ASSOCIATION, INC.			
Principal Place of Business 1718 E. 7TH AVE. SUITE 301 TAMPA, FL 33605 US		Mailing Address 1718 E. 7TH AVE. C/O MARK KELLY, SUITE 301 TAMPA, FL 33605 US	
DO NOT WRITE IN THIS SPACE			
		04132005 No Chg-NP CR2E037 (10/03)	
		4. FEI Number NOT APPLICABLE	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent KELLY, MARK F 1718 E. 7TH AVE. SUITE 301 TAMPA, FL 33605			DO NOT WRITE IN THIS SPACE
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)</small> DATE _____			
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
		U000000315141 04/19/05-80024-010 61.25	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PAWLOWSKI, VINCENT R 1718 E 7TH AVE #201 TAMPA, FL 33605		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D OLSEN, JOANNA 1722 E. 7TH AVE TAMPA, FL 33605		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DST KELLY, MARK F 1718 E. 17TH AVE. STE. 301 TAMPA, FL 33605		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
12. 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: _____		4/14/05 (813) 242-4404	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	