

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED

07 APR 27 PM 3:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**



04122007 No Chg-NP

CR2E037 (4/06)

07

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

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	

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IN THIS SPACE**

400103092644
05/23/07--01009--002 **61.25

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Mark F. Kelly **MARK F. KELLY** 4/13/07 813-248-6400