## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT # N11782

1. Entity Name

THE 7TH AVENUE BUSINESS CONDOMINIUM OWNERS' ASSOCIATION, INC.

Principal Place of Business

% MARK KELLY 1718 E 7TH AVE, STE. 301 TAMPA, FL 33605 US Mailing Address

% MARK KELLY 1718 E 7TH AVE, STE. 301 TAMPA, FL 33605 US

#### FILED Mar 31, 2006 08:00 AM Secretary of State



#### DO NOT WRITE IN THIS SPACE

02142006 No Chg-NP CR2E037 (11/05)

| 4. FEI Number                    | • | Applied Far       |
|----------------------------------|---|-------------------|
| NOT APPLICABLE                   |   | Not Applicable    |
| 5. Certificate of Status Desired | П | \$8.75 Additional |

Fee Required

6. Name and Address of Current Registered Agent

KELLY, MARK F 1718 E 7TH AVE, STE. 301 TAMPA, FL 33605

# DO NOT WRITE IN THIS SPACE

|  | named entity submits this statement for the pions of registered agent. | urpose of changing its registered office                 | or registered agent, or bot                      | th, in the State of Florida. I am familiar with, and accept |  |  |
|--|--|--|--|---|--|--|
| SIGNATURE  | Signature, typed or pricted neme of registered agent and tine if       | applicable (NOTE Registered Agent sig                    | natura raquired when reinsteting)                | DATE  |  |  |
|  | Filing Fee is \$61.25<br>Due by May 1, 2006                            | Election Campaign Financing     Trust Fund Contribution. | \$5.00 May Be<br>Added to Fees                   |   |  |  |
| 10.  | OFFICERS AND DIREC   | TORS   |  |   |  |  |
| Hitle<br>Name<br>Street address<br>Chty-St- <i>t</i> ip  | PD<br>GUYTON, BARBARA<br>1726 E 7TH AVE.<br>TAMPA, FL                  | -  |  |   |  |  |
| NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | TSD<br>KELLY, MARK F<br>1718 E 7TH AVE STE 301<br>TAMPA, FL            |  | U00000487479<br>04/13/06-80075-016 <b>6</b> 1.25 |   |  |  |
| title<br>Name<br>Street address<br>City-St-zip   | VPD<br>GUYTON, ROBERT<br>1726 E 7TH AVE.<br>TAMPA, FL                  |  | DO   | NOT WRITE   |  |  |
| NAME<br>STREET ADDRESS<br>CATY-ST-ZIP  | D<br>ROBERT SAITTA<br>1728 E 7TH AVE<br>TAMPA, FL                      |  | IN .   | THIS SPACE  |  |  |
| TIFLE NAME STREET ADDRESS CITY-ST-ZIP  |  |  |  |   |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-21P  | And the second   |  | · ••••   | · · · · · · · · · · · · · · · · · · ·                       |  |  |
| 12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes, I further certify that the information |  |  |  |   |  |  |

12. I needy certify that the information supplied with this hind does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or suppliemental 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 chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapter 617, Florida Statutes.

SIGNATURE:

HATURE AND TYPED INDERTRED NAME OF SIGNING OFFICER ON DIRECTOR

8 27/00

815-218-6-900