

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2006 8:00 am
Secretary of State

04-18-2006 90071 028 ****61.25

DOCUMENT # N35140

1. Entity Name
SHIPWATCH SIX CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**10825 SEMINOLE BLVD
LARGO, FL 33778 US**

Mailing Address
**10825 SEMINOLE BLVD
LARGO, FL 33778 US**

40052449



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03312006 Chg-NP CR2E037 (11/05)

4. FEI Number
59-2979103

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**KAPPER, THOMAS W.
10825 SEMINOLE BLVD
#1
LARGO, FL 33778**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **DS** ☐ Delete
NAME **REEVES, LINDA**
STREET ADDRESS **11411 HARBOR WAY #1620**
CITY-ST-ZIP **LARGO, FL 33774**

TITLE **DP** ☐ Delete
NAME **LAPLANTE, LARRY**
STREET ADDRESS **11360 HARBOR WAY #1665**
CITY-ST-ZIP **LARGO, FL 33774**

TITLE **D** ☐ Delete
NAME **SHANK, BARBARA**
STREET ADDRESS **11340 HARBOR WAY #1643**
CITY-ST-ZIP **LARGO, FL 33774**

TITLE **DT** ☐ Delete
NAME **O'DONNELL, JOAN**
STREET ADDRESS **11400 HARBOR WAY #1633**
CITY-ST-ZIP **LARGO, FL 33774**

TITLE **D** ☐ Delete
NAME **ZINN, CHARLENE**
STREET ADDRESS **11411 HARBOR WAY #1624**
CITY-ST-ZIP **LARGO, FL 33774**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition

NAME **DT President Lawrence P Laplante**
STREET ADDRESS **11360 Harbor Way # 1665 Largo**
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition

NAME **O'Donnell, John**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

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 authority like empowered.

SIGNATURE **Lawrence P Laplante**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

727-596-6560

4-7-06