

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 10, 2008 08:00 AM
Secretary of State

DOCUMENT # N42788 1. Entity Name PASS-A-GRILLE TOWNHOUSES CONDOMINIUM ASSOCIATION, INC.	
---	---

Principal Place of Business 3216 EL CENTRO SOUTH ST. PETERSBURG, FL 33706-4010	Mailing Address 3216 EL CENTRO SOUTH ST. PETERSBURG, FL 33706-4010
--	--

DO NOT WRITE IN THIS SPACE



01042008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-3134784	Applied For ☐ Not Applicable
------------------------------------	--

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

6. Name and Address of Current Registered Agent RAUCHWAY, MICHAEL 3216C EL CENTRO ST. PETERSBURG, FL 33706
--

**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

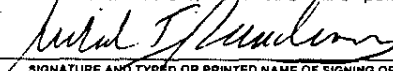
SIGNATURE Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)	DATE
--	------

Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	000000778793 01/11/08-80011-020 61.25
---	---	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RAUCHWAY, MICHAEL 3216 EL CENTRO SOUTH ST PETERSBURG BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ESTRIDGE, JR., PAUL E 3216 EL CENTRO STREET SAINT PETERSBURG, FL 33706
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAMBLIN, STEVEN 3216 E CENTRO SOUTH ST PETERSBURG BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:  MICHAEL RAUCHWAY 1/4/08 7273609233	Date	Anytime Phone #
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		