

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2008 8:00 am
Secretary of State

02-20-2008 90008 002 ****61.25

DOCUMENT # N49397 1. Entity Name NEIGHBORHOOD HOMEOWNERS' ASSOCIATION, INC.																																																																																																							
Principal Place of Business C/O CONDOMINIUM ASS. 3001 EXECUTIVE DR. #260 CLEARWATER, FL 33762 c/o Sterling Mgmt. 2870 Scherer Drive Suite 100 St. Petersburg, FL 33716 U.S.		Mailing Address C/O CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DRIVE STE 260 CLEARWATER, FL 33762 c/o Sterling Mgmt. 2870 Scherer Drive Suite 100 St. Petersburg, FL 33716 U.S.																																																																																																					
2. Principal Place of Business - No P.O. Box # 2870 Scherer Drive Suite, Apt. #, etc. Suite 100 City & State St. Petersburg, FL Zip 33716 Country U.S.		3. Mailing Address 2870 Scherer Drive Suite, Apt. #, etc. Suite 100 City & State St. Petersburg, FL Zip 33716 Country U.S.																																																																																																					
4. FEI Number 59-3137324		Applied For Not Applicable																																																																																																					
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required																																																																																																					
6. Name and Address of Current Registered Agent CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DR., SUITE 260 CLEARWATER, FL 33762		7. Name and Address of New Registered Agent Name: James R. Defurio P.A. Street Address (P.O. Box Number is Not Acceptable): 201 E. Kennedy Blvd. Ste. 715 City: Tampa FL Zip Code: 33602																																																																																																					
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: <i>[Signature]</i> as President DATE: 1-25-08 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)																																																																																																							
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																																																																																																					
Make check payable to Florida Department of State																																																																																																							
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="2" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</th> </tr> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 70%;">D DORIS, DAN ☒ Delete</td> <td style="width: 30%;">TITLE</td> <td style="width: 70%;">VP Sara Jean Buie Gross ☐ Change ☒ Addition</td> </tr> <tr> <td>NAME</td> <td>DORIS, DAN</td> <td>NAME</td> <td>Sara Jean Buie Gross</td> </tr> <tr> <td>STREET ADDRESS</td> <td>5004 QUEEN PALM TERR. NE.</td> <td>STREET ADDRESS</td> <td>P.O. Box 40041</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>SAINT PETERSBURG, FL 33703</td> <td>CITY-ST-ZIP</td> <td>St. Petersburg, FL 33743</td> </tr> <tr> <td>TITLE</td> <td>SD COATES, STEVEN ☒ Delete</td> <td>TITLE</td> <td>D Timothy Gross ☐ Change ☒ Addition</td> </tr> <tr> <td>NAME</td> <td>COATES, STEVEN</td> <td>NAME</td> <td>Timothy Gross</td> </tr> <tr> <td>STREET ADDRESS</td> <td>5014 WINDMILL PALM TERR.</td> <td>STREET ADDRESS</td> <td>4922 Queen Terr. N.E.</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>SAINT PETERSBURG, FL 33707</td> <td>CITY-ST-ZIP</td> <td>St. Petersburg, FL 33703</td> </tr> <tr> <td>TITLE</td> <td>TD DUCATTE, GREGG ☒ Delete</td> <td>TITLE</td> <td>S Cheryl Miles ☐ Change ☒ Addition</td> </tr> <tr> <td>NAME</td> <td>DUCATTE, GREGG</td> <td>NAME</td> <td>Cheryl Miles</td> </tr> <tr> <td>STREET ADDRESS</td> <td>4827 QUEEN PALM TERRACE NE</td> <td>STREET ADDRESS</td> <td>4831 Queen Palm Terr. N.E.</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>SAINT PETERSBURG, FL 33703</td> <td>CITY-ST-ZIP</td> <td>St. Petersburg, FL 33703</td> </tr> <tr> <td>TITLE</td> <td>D MACHUGA, MARIE ☐ Delete</td> <td>TITLE</td> <td>P/T ☒ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td>MACHUGA, MARIE</td> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4900 QUEEN PALM TERR. NE</td> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>SAINT PETERSBURG, FL 33703</td> <td>CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td>PD ROMIG, LEE ☒ Delete</td> <td>TITLE</td> <td>D Elaine Schreiber ☐ Change ☒ Addition</td> </tr> <tr> <td>NAME</td> <td>ROMIG, LEE</td> <td>NAME</td> <td>Elaine Schreiber</td> </tr> <tr> <td>STREET ADDRESS</td> <td>5006 WINDMILL PALM TERR.</td> <td>STREET ADDRESS</td> <td>1144 Darlington Oak Dr. N.E.</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>ST. PETERSBERG, FL</td> <td>CITY-ST-ZIP</td> <td>St. Petersburg, FL 33703</td> </tr> <tr> <td>TITLE</td> <td>☐ Delete</td> <td>TITLE</td> <td>☐ Change ☐ Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td>CITY-ST-ZIP</td> <td></td> </tr> </table>				10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		TITLE	D DORIS, DAN ☒ Delete	TITLE	VP Sara Jean Buie Gross ☐ Change ☒ Addition	NAME	DORIS, DAN	NAME	Sara Jean Buie Gross	STREET ADDRESS	5004 QUEEN PALM TERR. NE.	STREET ADDRESS	P.O. Box 40041	CITY-ST-ZIP	SAINT PETERSBURG, FL 33703	CITY-ST-ZIP	St. Petersburg, FL 33743	TITLE	SD COATES, STEVEN ☒ Delete	TITLE	D Timothy Gross ☐ Change ☒ Addition	NAME	COATES, STEVEN	NAME	Timothy Gross	STREET ADDRESS	5014 WINDMILL PALM TERR.	STREET ADDRESS	4922 Queen Terr. N.E.	CITY-ST-ZIP	SAINT PETERSBURG, FL 33707	CITY-ST-ZIP	St. Petersburg, FL 33703	TITLE	TD DUCATTE, GREGG ☒ Delete	TITLE	S Cheryl Miles ☐ Change ☒ Addition	NAME	DUCATTE, GREGG	NAME	Cheryl Miles	STREET ADDRESS	4827 QUEEN PALM TERRACE NE	STREET ADDRESS	4831 Queen Palm Terr. N.E.	CITY-ST-ZIP	SAINT PETERSBURG, FL 33703	CITY-ST-ZIP	St. Petersburg, FL 33703	TITLE	D MACHUGA, MARIE ☐ Delete	TITLE	P/T ☒ Change ☐ Addition	NAME	MACHUGA, MARIE	NAME		STREET ADDRESS	4900 QUEEN PALM TERR. NE	STREET ADDRESS		CITY-ST-ZIP	SAINT PETERSBURG, FL 33703	CITY-ST-ZIP		TITLE	PD ROMIG, LEE ☒ Delete	TITLE	D Elaine Schreiber ☐ Change ☒ Addition	NAME	ROMIG, LEE	NAME	Elaine Schreiber	STREET ADDRESS	5006 WINDMILL PALM TERR.	STREET ADDRESS	1144 Darlington Oak Dr. N.E.	CITY-ST-ZIP	ST. PETERSBERG, FL	CITY-ST-ZIP	St. Petersburg, FL 33703	TITLE	☐ Delete	TITLE	☐ Change ☐ Addition	NAME		NAME		STREET ADDRESS		STREET ADDRESS		CITY-ST-ZIP		CITY-ST-ZIP	
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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: <i>Marie A. Machuga</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		2/15/08 (727) 526-8759 Date Daytime Phone #																																																																																																					