

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 22, 2008
Secretary of State**

DOCUMENT# N50800

Entity Name: SERVOS COMMERCIAL CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6302 S. TEX PT
HOMOSASSA, FL 34448

New Principal Place of Business:

Current Mailing Address:

6302 S. TEX PT
HOMOSASSA, FL 34448

New Mailing Address:

FEI Number: 59-2917583 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HASTINGS, NORAH
7 PINWOOD GREEN
HOMOSASSA, FL 34446 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCIGLIA, KEVIN
Address: 6270 PIEDMONT DR.
City-St-Zip: SPRING HILL, FL 34606

Title: V () Delete
Name: FORTE, DANIEL
Address: 4125 W. PICNIC LN
City-St-Zip: HOMOSASSA, FL 34446

Title: S () Delete
Name: ROBERTS, DEBORAH
Address: 3 S. SHUMARD CT.
City-St-Zip: HOMOSASSA, FL 34446

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEVIN SCIGLIA

P

04/22/2008

Electronic Signature of Signing Officer or Director

Date