

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 17, 2004 8:00 am
Secretary of State

09-17-2004 90004 024 ****61.25

DOCUMENT # N94000002042 1. Entity Name SOUTHVIEW OF COUNTRYWAY HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 7001 TEMPLE TERRACE HWY TEMPLE TERRACE, FL 33637			Mailing Address 7001 TEMPLE TERRACE HWY TEMPLE TERRACE, FL 33637		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number 59-3248507					
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent MEZER, STEVEN H PA C/O BUSH ROSS GARDNER WARREN 220 S FRANKLIN ST TAMPA, FL 33602			7. Name and Address of New Registered Agent Name: Antonio Duarte Street Address (P.O. Box Number is Not Acceptable): 6221 Lindo City Blvd City: Campbell FL Zip Code: 33603		
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:  ANTONIO DUARTE DATE: 8/26/04 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 September 8, 2004		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP THOMPSON, DANIEL A 11417 GEORGETOWN CIR TAMPA, FL 33635 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Scott Campbell 8805 Rustic Trail Tampa, FL 33635 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP URENA, CLARA 11420 GEORGETOWN CR TAMPA, FL 33635 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT ESSEFF, PETER 11415 GEORGETOWN CIRCLE TAMPA, FL 33635 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP Vincent Fasano 11327 Georgetown Circle Tampa, FL 33635 ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:  Scott R. Campbell DATE: 8/11/04 DAYTIME PHONE #: 727-299-4324 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

24085527



08092004 Chg-NP CR2E037 (10/03)

4. FEI Number
59-3248507

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name: **Antonio Duarte**
Street Address (P.O. Box Number is Not Acceptable): **6221 Lindo City Blvd**
City: **Campbell** FL Zip Code: **33603**

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**Filing Fee is \$61.25
Due by September 8, 2004**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DP
THOMPSON, DANIEL A
11417 GEORGETOWN CIR
TAMPA, FL 33635** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DP
Scott Campbell
8805 Rustic Trail
Tampa, FL 33635** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**VP
URENA, CLARA
11420 GEORGETOWN CR
TAMPA, FL 33635** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DT
ESSEFF, PETER
11415 GEORGETOWN CIRCLE
TAMPA, FL 33635** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DVP
Vincent Fasano
11327 Georgetown Circle
Tampa, FL 33635** ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ Delete

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☐ Change ☐ Addition

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SIGNATURE:  **Scott R. Campbell** DATE: **8/11/04** DAYTIME PHONE #: **727-299-4324**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR