2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 25, 2008 8:00 am Secretary of State

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1. Entity Nam	MENT # N9500000 PYAL NEIGHBORHOOD A		 ,		43 015 ****61		
Principal Place of Business 777 S. HARBOUR ISLAND BLVD SUITE 270 TAMPA, FL 33602 US		Mailing Address 777 S. HARBOUR ISLAND BLVD SUITE 270 TAMPA, FL 33602 US		. 	e iku eski eski eski eski	1 831/1 83181 BYW BIABI 1/1	101 21 17 01
2. Principal Place of Business - No P.O. Box #		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01112008 Cr	ng-NP C	R2E037 (12/06)	
City & State	е	City & State		4. FEI Number 59-329527	4. FEI Number Applied For 59-3295277 Not Applicable		
Zip	Country	Zip	Country	5. Certificate of St	atus Desired [\$8.75 Add Fee Required	itional
		t Registered Agont		_7. Name and Add	ress of New Regis	tered Agent	
			Name				
CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DR, #200 CLEARWATER, FL 33762			Street Address (P.O. Box Number is Not Acceptable)				
			City			FL Zip Code)
	named entity submits this statement lions of registered agent.	or the purpose of changing its re	gistered office or reg	istered agent, or both, in	the State of Florida	. I am familiar with,	and accept
SIGNATURE .	Signature, typed or printed name of registered ages	nt and title if applicable. (NOTE: R	egistered Agent signature re	quired when reinstating)		DATE	
Filing Fee is \$61.25 Due by May 1, 2008 9. Election Campaign Trust Fund Contribu							
10.	OFFICERS AND D	IRECTORS	11.	ADDITIONS/CHANG	ES TO OFFICERS A	ND DIRECTORS IN	10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV SCHLINGMAN, DAVE 1039 ROYAL PASS ROAD TAMPA, FL 33602	□i Delete		RitA EVA O21 RoyAL P TAMPA, Fl.	noff Pass Rd.	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SOROKA, STEVEN 1028 ROYAL PASS ROAD TAMPA, FL 33602	☐ Delete		TErE SOROL 128 LOYAL 1 TAMPA, Fl.		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST DINTENFASS, DAVID 1006 ROYAL PASS ROAD TAMPA, FL 33602	☐ Delete	TITLE D S		5/ 501/	Change	Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP	P RACHELSON, SAUL 1009 ROYAL PASS RD TAMPA, FL 33602	☐ Delata	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EVANOFF, RITA 1021 ROYAL PASS RD TAMPA, FL 33602	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ANDRESS		☐ Delete	TITLE NAME CIPCET ADDRESS			☐ Change	☐ Addition

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.

CITY-ST-ZIP

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CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

D. SCHLINGMAN-NP

10 APR 08 Date

Daytime Phone #