

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2005 8:00 am
Secretary of State

03-18-2005 90051 014 ****61.25

DOCUMENT # N95000004566

1. Entity Name
PARADISE BAY ESTATES TENANTS' ASSOC., INC.



Principal Place of Business
10315 44 AVE. WEST
BRADENTON, FL 34210 US

Mailing Address
10315 44 AVE. WEST
42 4TH ST
BRADENTON, FL 34210 US



2. Principal Place of Business

3. Mailing Address
10315 44th Ave. W.

Suite, Apt. #, etc.

Suite, Apt. #, etc.
39 4th ST

City & State

City & State
Bradenton, FL

Zip

Country

Zip
34210

Country

03142005 Chg-NP CR2E037 (10/03)

4. FEI Number
65-0635722

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

ROBERTS, HAROLD J
10315 44TH AVE W UNIT 63 2ND ST
BRADENTON, FL 34210

7. Name and Address of New Registered Agent

Name **Florence H. Dowding**

Street Address (P.O. Box Number is Not Acceptable)
10315 44th Ave W.

39 4th ST

City **Bradenton**

FL

Zip Code
34210

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 **Florence H. Dowding**
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

MARCH 15, 2005

DATE

Filing Fee is \$61.25
Due by May 1, 2005

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

TITLE **T** ☒ Delete
NAME **ROBERTS, HAROLD**
STREET ADDRESS **10315 44TH AVE WEST 63 2ND STREET**
CITY-ST-ZIP **BRADENTON, FL 34210**

TITLE **D** ☒ Delete
NAME **LAMB, JENNIE**
STREET ADDRESS **10315 44TH AVE W, 62 SECOND ST**
CITY-ST-ZIP **BRADENTON, FL 34210**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **T** ☒ Change ☐ Addition
NAME **Florence H. Dowding**
STREET ADDRESS **10315 44th Ave W, 39 4th ST**
CITY-ST-ZIP **Bradenton, FL 34210**

TITLE **P** ☒ Change ☐ Addition
NAME **Ronald E. Drahe**
STREET ADDRESS **10315 44th Ave W 57-4th ST**
CITY-ST-ZIP **Bradenton, FL 34210**

TITLE **V.P.** ☐ Change ☒ Addition
NAME **Nina Edmondson**
STREET ADDRESS **10315 44th Ave W - 49-3rd ST**
CITY-ST-ZIP **Bradenton, FL 34210**

TITLE **S.** ☐ Change ☒ Addition
NAME **Margaret Kearney**
STREET ADDRESS **10315 44th Ave W - 41-4th ST**
CITY-ST-ZIP **Bradenton, FL 34210**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: **Florence H. Dowding - Florence H. Dowding** 3-15-05 - 941-795-5039
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #