

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2006 08:00 AM
Secretary of State

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
39 4TH ST
BRADENTON, FL 34210 US**



01252006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0835722

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**DOWDING, FLORENCE
10315 44TH AVE W
39 4TH ST
BRADENTON, FL 34210**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when certifying)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	T
NAME	DOWDING, FLORENCE H
STREET ADDRESS	10315 44TH AVE W 39 4TH ST
CITY-ST-ZIP	BRADENTON, FL 34210
TITLE	P
NAME	DRAKE, RONALD E
STREET ADDRESS	10315 44TH AVE W 57 4TH ST
CITY-ST-ZIP	BRADENTON, FL 34210
TITLE	V
NAME	EDMONDSON, NINA
STREET ADDRESS	10315 44TH AVE W 49 3RD
CITY-ST-ZIP	BRADENTON, FL 34210
TITLE	S
NAME	KEARNEY, MARGARET
STREET ADDRESS	10315 44 AVE W 41 4TH STREET
CITY-ST-ZIP	BRADENTON, FL 34210
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/13/06-80075-021 61.25

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IN THIS SPACE**

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: *Florence Dowding*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-29-06

941-795-5039

Date

Director's Phone #