## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N99000000488

Apr 23, 2009 Secretary of State

Entity Name: FLORENCIA OWNER'S ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

100 BEACH DRIVE NORTHEAST ST. PETERSBURG, FL 33701

**Current Mailing Address: New Mailing Address:** 

9887 FOURTH STREET NORTH SUITE 301 ST. PETERSBURG, FL 33702

FEI Number: 59-3577774 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RAMPART PROPERTIES 9887 FOURTH STREET NORTH SUITE 301 SAINT PETERSBURG, FL 33702 US

**OFFICERS AND DIRECTORS:** 

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:

Date

## Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete TERRA, ANTHONY DR SWANICK, DR. EDWARD Name: Name: 9887 FOURTH STREET NORTH Address: 9887 FOURTH STREET NORTH Address: City-St-Zip: SAINT PETERSBURG, FL 33702 City-St-Zip: SAINT PETERSBURG, FL 33702

Title: () Delete Title: () Change () Addition

VAN ZANDT, RUSSELL Name: Name: Address: 9887 FOURTH STREET NORTH Address: City-St-Zip: SAINT PETERSBURG, FL 33702 City-St-Zip:

Title: VP/D () Delete Title: () Change () Addition

LEE, MARION DR Name: Name: 9887 FOURTH STREET NORTH Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33702 City-St-Zip:

Title: Title: DS (X) Change ( ) Addition ( ) Delete Name: HAUEISEN, BILL Name: HAUEISEN, BILL

9887 FOURTH STREET NORTH 9887 FOURTH STREET NORTH Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33702 City-St-Zip: SAINT PETERSBURG, FL 33702

Title: () Delete Title: (X) Change ( ) Addition

PETERS, RITA Name: Name: PETERS, RITA

9887 FOURTH STREET NORTH 9887 FOURTH STREET NORTH Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33702 City-St-Zip: SAINT PETERSBURG, FL 33702

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: RUSSELL VANZANDT PD 04/23/2009