

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000008821

**FILED**  
**Mar 05, 2013**  
**Secretary of State**  
**CC8347965735**

**Entity Name:** CENTURY HOME OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

6735 54TH AVENUE NORTH, LOT #31  
ST. PETERSBURG, FL 33709

**Current Mailing Address:**

6735 54TH AVENUE NORTH, LOT #31  
ST. PETERSBURG, FL 33709

**FEI Number:** 73-1632259

**Certificate of Status Desired:** No

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

ZANDER, DOROTHY RTREAS.  
6735 54TH AVE  
LOT# 31  
SAINT PETERSBURG, FL 33709 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name FORTIN, LUCIENNE  
Address 6735 54TH AVE N LOT 25  
City-State-Zip: SAINT PETERSBURG FL 33709

Title VP  
Name TRINKWON, GORDON  
Address 6735 54TH AVE N LOT 38  
City-State-Zip: SAINT PETERSBURG FL 33709

Title S  
Name HANLEY, MARTY  
Address 6935 54TH AVE N. LOT 61  
City-State-Zip: SAINT PETERSBURG FL 33709

Title T  
Name ZANDER, DOROTHY R  
Address 6735 54TH AVENUE NORTH, LOT #31  
City-State-Zip: ST. PETERSBURG FL 33709

Title D  
Name MEDLEY, LINDA  
Address 6735 54TH AVE N #24  
City-State-Zip: ST. PETERSBURG FL 33709

Title D  
Name SHANKS, LUCILLE  
Address 6735 54TH AVE N #49  
City-State-Zip: ST. PETERSBURG FL 33709

Title D  
Name HOPE, TEAL  
Address 6735 54TH AVE. N. LOT 65  
City-State-Zip: ST. PETERSBURG FL 33709

Title D  
Name BAILEY, ETHYL  
Address 6735 54TH AVE. N. LOT 18  
City-State-Zip: ST. PETERSBURG FL 33709

*I hereby 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 all other like empowered.*

**SIGNATURE:** DOROTHY R. ZANDER

**REGISTERED AGENT**

**03/05/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date