

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000001754

1. Entity Name

PALMA CEIA NEIGHBORHOOD ASSOCIATION, INC.

**FILED**  
**Feb 28, 2000 8:00 am**  
**Secretary of State**

02-28-2000 90074 031 \*\*\*\*61.25

Principal Place of Business

Mailing Address

3314 BARCELONA STREET  
TAMPA FL 33629

3314 BARCELONA STREET  
TAMPA FL 33629-7104

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3296191

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JENNIS, DAVID S  
201 S FRANKLIN STREET  
SUITE 2600  
TAMPA FL 33602

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

*John N. LaRocca*  
John N. LaRocca  
President

2/17/00

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete

NAME LAROCCA, JOHN N  
STREET ADDRESS 3314 BARCELONA ST  
CITY-ST-ZIP TAMPA FL 33629

TITLE D ☒ Delete

NAME JENNIS, DAVID S  
STREET ADDRESS 3324 BARCELONA ST  
CITY-ST-ZIP TAMPA FL 33629

TITLE D ☐ Delete

NAME KOTZER-JENNIS, LORI  
STREET ADDRESS 3324 BARCELONA ST  
CITY-ST-ZIP TAMPA FL 33629

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 ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE TREASURER ☒ Change ☐ Addition

NAME MARY L. LASSITER  
STREET ADDRESS 3408 W. Granada Street  
CITY-ST-ZIP Tampa, FL 33629

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*Lori K. Jennis*  
LORI K. JENNIS

2/17/00

813-831-8389

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)