NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State
DIVISION OF CORPORATIONS

1996

709264 DOCUMENT #

(6)

TOWN APARTMENTS, INC. NO. 4, A CONDOMINIUM							
Principal Place of	f Business	Mailing Address					
		1900 61ST AVE N					
1900 61ST AVE N ST PETERSBURG FL 33714 ST PETERSBURG FL 33714			33714				
0. . 0.					Date incorporated or Qualified Trocking	3a. Date of Last Report 02/16/1995	
					07/06/1965	Applied For	
2. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number 59-2875646	Not Applicable	
21		26				\$8.75 Additional	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Required		
22		City & State			6. Election Campaign Financing	\$5.00 May Be	
City & State		28			Trust Fund Contribution	Added to Fees	
23 Zip	Country	Zip	Cour	ntry	8. This corporation has liability for	intangible tax under s. 199.032, Yes 2No	
24	25	29	30		10. Name and Address of New R	Peristered Abent	
	9. Name and Address of Curren	t Registered Agent		64 L Nome	10. Name and Address of New I	1091010100	
				81 Name			
JOHNSO	n, elmer r.			82 Street Ad	dress (P.O. Box Number is Not Acceptab	DIE)	
	ST ST NO			83			
	RSBURG FL 33714			-		as Zo Codo	
			į	84 City		FL 85 Zip Code	
			t to the she	no paged corr	poration submits this statement for the public pard of directors. I hereby accept the app	at shapping its registered office	
11. Pursuant to	o the provisions of Sections 617.0502	2 and 617.1508, Florida Sta ida. Such change was auth	orized by the o	corporation's b	poration submits this statement for the purposed of directors. I hereby accept the app	pointment as registered agent. I am	
familiar wit	ed agent, or both, in the State of Flori th, and accept the obligations of, Sect	tion 617.0503, Florida Stati	ites.				
SIGNATURE _			NOTE Reaster-1	Agent signature req	ured when reinstahig)	DATE	
	Signature, typed or printed name of registered agust	ID DIRECTORS	13.		ADD: HONS/CHANGES TO OF	FIGERS AND DIRECTORS IN 12	
12.	T	DELETE	111	TLE	ELMER JUHNS	Con Change Addition	
TITLE	MATHENY, LORAINE		1.2 N		5940 21 ST NO		
NAME	5940 21ST ST N		135	TREET ADDRESS	ST PETE FL	33714	
STREET ADDRESS	ST PETERSBURG, FL 00000	1	1.40	ITY - ST - ZIP	37 7670 76	Change Addition	
CITY-ST-ZIP	D	DELETE	211	ITLE)	PRGSIDENT		
NAME	BORRELLI, JOSEPH		22 N	IAME	JUCKPH B	ORRELLI	
STREET ADORESS	5940 21ST ST N		235	TREET ADDRESS	5940 215TN	PETE FL	
CITY - ST-ZIP	ST PETERSBURG, FL 00000)		CITY ST: AF	JUSEPH STEP	Addition	
TITLE	D	DELETE	311		SALE SECTION	(V/)	
NAME	WALSH, MARYBELLE	-		IAME	5940 21 571		
STREET ADDRESS	5940 21ST ST N			STREET ADDRESS	ST PETE F	L 33714	
CITY-ST-ZIP	ST PETERSBURG, FL 00000	0		CITY-ST-ZIP	ST PETE F WARD, EVA 6940 21 A ST PETE F	Change Addition	
TITLE	D	DELETE		TITLE	WMKD, EVA	C 1/2	
NAME	D'ALLESANDRO, PHILIP			NAME STHEET ADDRESS	5940 21 et) / /V (/	
STREET ADDRESS	5940 21ST ST N	•		1	ST PETE F	2 337/ <u>Y</u>	
CITY-ST-ZIP	ST PETERSBURG, FL 00000	0 □ □ DELETE		CITY - ST - ZIP TITLE		☐ Change ☐ Addition	
TITLE	SEC	[_]DELETE		NAME		11/125	
NAME	SANTOS, ANTONE			STREET ADDRESS		\$ (26	
STREET ADDRESS	5940 21 ST NORTH	ω	1	CITY-ST-ZIP			
CITY-ST-ZIP	ST PETERSBURG, FL 0000	DELETE		TITLE	JAMES DUNN- 5940 21 ST N ST PETE F	V/P Change Addition	
TITLE	VP	Cy Present		NAME	CAUSE OF CT AL	0'' 7 -11	
NAME	MCINNIS, GERALD			STREET ADDRESS	3940 31 51		
STREET ADDRESS		w		A.T. 01 710	ST rett F	2 337141	
CITY - ST - ZIP	ST PETERSBURG, FL 0000	At the Usia files is voluntari	ly furnished ac	d does not qu	alify for the exemption stated in Section 1	19.07(3)(k), Florida Statutes. I further	

6.11Y-SI-ZIP 31 FELENDUNG, FL WWW.
14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes: Flurther certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

1/30/96 522.2625