## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

712134

(6)

TOWN APARTMENTS, INC. NO. 10, (A CONDOMINIUM)								
Principal Place	of Business	Mailing Address				I INDIAL INDIA ILIAN ILIBAN IL		(BIE BEBIT DIBIT GIGIT DIGIT FORT
1900 61ST AVENUE. NORTH 1900 61ST AVENUE. NORTH ST. PETERSBURG FL 33714 ST. PETERSBURG FL 33714								
						3. Date incorporated or Qualified 01/23/1967	3a. C	Date of Last Report 02/08/1995
2. Principal Pla	ice of Business	2a. Mailing Address				4. FEI Number		Applied For
21 26						59-2876277		Not Applicable
Suite, Apt. #	t, etc.	Suite, Apt. #, etc.	Surte, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required
City & State	#/###	City & State	City & State			6. Election Campaign Financing		\$5.00 May Be
23		28				Trust Fund Contribution		Added to Fees
Zip	Country	Ζip	Coun	try		8. This corporation has liability for in		
24	25	29	30			Florida Statutes  10. Name and Address of New Re	Yes	<u> </u>
	9. Name and Address of Currer	nt Hegistered Agent		B1[	Name	10. Name and Address of New Ad	Gistered	i waeiir
							<u>.                                    </u>	
GRAY, JESSIE R. 2050 58TH AVE. N. N-7				B2	Street A	Address (P.O. Box Number is Not Acceptable)		
	ERSBURG FL 33714		ļ.	83				
SITEIL	11000NO 1 E 007 14		ļ.	84	City			85 Zip Code
				1	,		FI	<b>-</b>     '
11. Pursuant to	o the provisions of Sections 617,0502	2 and 617.1508, Florida Statuti	es, the above	re-na	amed cor tration's b	poration submits this statement for the purporation of directors. I hereby accept the appo	ose of cl sintment a	hanging its registered office   as registered agent. I am
familiar wit	th, and accept the obligations of Sec	tion 617 0503, Florida Statutes	i.	o. p. o		, , , , , , , , , , , , , , , , , , , ,		
SIGNATURE	(Lenia K.	Gran					/-/	19-96
	Signature, town or printed han a of registerial light	ir and title if application (NC ID DIRECTORS	TE Registered A	Agent	s.gnature rec	jured when reinstating) ADDITIONS/CHANGES TO OFF		
12.	VP CITIOERS AN	DELETÉ	1.1 TITI	Lŧ		•——		Change Addition
NAME	NEALIS, ELSIE W		1.2 NAF	ME		CATHERNE LEATY		
STREET ADDRESS	2050 58 AVE N N-28		1.3 STF	REET	ADDRESS			
CITY-ST-ZIP	ST PETERBURG FL 33714		1.4 CIT	Y-S1	r - ZIP			1/
TITLE	S DELETE			LE		T		Change Addition
NAME	CISNIEWICZ, ADELE		2 2 NAI	2.2 NAME		LEAHY CATHERY	NE	_
STREET ADDRESS	1950 58TH AVE. N N-28		23 STF	2.3 STREET ADDRESS		1950 58 AVE N	K-	<del>20</del>
CHTY ST ZIP	ST PETERBURG FL 33714			2 4 CITY - ST - ZIP		ST PETE IL 33	774	
TITLE	Ţ	DELETE	3 1 TIT			D		Change Addition
NAME	CONPROPST, PHYLIS	•	3 2 NA		15 Deces	2050 58 AVEN	N-	.4
STREET ADDRESS	2050 58 AVE. N. N-25				ADORESS	ST PATE FL 33	7/4	
01*Y-S!-7IP 111LE	ST PETERBURG FL 33714	DELETE	3.4 C(		1 - ZIP	D	117	Change Addition
NAME	D Leahy,Catherine	A	4 2 NA			HARRISON CLARA		/ 5
STREET ADDRESS	1950 58 AVE. N R-20				ADDRESS	2050 58 AVE N	N-3	5~
CiTY-ST-ZIP	ST PETERBURG FL 33714		4.4 CH			ST PETE FL 3.	3714	
TITLE	D	DELETE	5 1 TH			D		Change Addition
NAME	PANICH, LOUISE	/ \	5 2 NA	ME		BROBOSKE, JULIA		•
STREET ADDRESS	2050 58TH AVE N. N-19		5 3 ST	REEI	ADDRESS	1950 58 AVA N	尺-3	3
C-TY-ST-ZIP	ST PETERBURG FL 33714		5.4 Cil	TY-S	T-71P	ST PETE FL 3371	<b>±</b>	
TITLE	Р	DELETE	61 TIT	LE				☐ Change ☐ Addition
NAME	GRAY, JESSIE R		6 2 NA	ME				
STREET ADDRESS	2050 58 AVE NO N-7		635[	REET	ADDRESS			
CITY - ST - ZIP	ST. PETERSBURG FL 33714		6 4 CI	TY-S	T-ZIP			

14. I do 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. I further 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 eath, 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:

THE AND THE OF PHINTED NAME OF SIGNING OFFICER OF DIRECTOR

7 - 19 - 96 Daytime Phone # CR2E037 (12/95