

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 723111

1. Entity Name

ST.PETERSBURG BAR ASSOCIATION INC

Principal Place of Business

2600 NINTH ST N. #602
P.O. BOX 7538
ST. PETERSBURG FL 33734

Mailing Address

2600 NINTH ST N. #602
P.O. BOX 7538
ST. PETERSBURG FL 33734

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

59-1095061

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

BERGMAN, NORA RIVA
2600 NINTH STREET NORTH
SUITE 602
ST. PETERSBURG FL 33704

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

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 NAME STREET ADDRESS CITY-ST-ZIP	SD BATTAGLIA, BRIAN P 980 TYRONE BLVD. SAINT PETERSBURG FL 33710	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CATHERINE A. KYRES 360 CENTRAL AVE. STE 1260 ST. PETERSBURG FL 33701	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LUDIN, ERIC E 5720 CENTRAL AVE. SAINT PETERSBURG FL 33707	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DOREEN S. YOUNG 200 CENTRAL AVE STE 1600 ST. PETERSBURG FL 33701	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD TUCKER, JOHN V 2101 5TH AVE., STE 1600 SAINT PETERSBURG FL 33713	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ROBERT P. BYELICK 360 CENTRAL AVE, 1TH FLOOR ST. PETERSBURG FL 33701	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD YOUNG, DAREEN S 200 CENTRAL AVE, STE 1600 ST. PETERSBURG FL 33701	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JOHN V. TUCKER 2101 5TH AVE. N. ST. PETERSBURG FL 33713	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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: *Robert P. Byelick* *Treasurer* 4/23/02 727-823-7474

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
May 12, 2002 8:00 am
Secretary of State

05-12-2002 90548 017 ****61.25



DO NOT WRITE IN THIS SPACE