

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 10 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 723554 (2)

1. Corporation Name
FIVE TOWNS OF ST. PETERSBURG, NO. 300, INC.



Principal Place of Business Mailing Address
5530 80TH STREET NORTH SUITE B106 ST. PETERSBURG FL 33709 US
8141 54TH AVENUE NORTH ST. PETERSBURG FL 33709-7054 US

3. Date Incorporated or Qualified 05/30/1972
3a. Date of Last Report 02/13/1996

2. Principal Place of Business 2a. Mailing Address
21 25
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 27
City & State City & State
23 28
Zip Country Zip Country
24 25 29 30

4. FEI Number 59-1979333 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
GENNARI, ANDREA
C/O PROPERTY ASSET MANAGEMENT
8141 54TH AVENUE NORTH
ST PETERSBURG FL 33709

10. Name and Address of New Registered Agent
81 Name SUSAN HIOTT
82 Street Address (P.O. Box Number is Not Acceptable) c/o PROPERTY ASSET MANAGEMENT
83 8141 54th AVENUE NORTH
84 City ST. PETERSBURG, FL FL 85 Zip Code 33709

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Susan Hiott* 3-5-97
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
TITLE S DELETE
NAME BUCKBOROUGH, DIXIE L
STREET ADDRESS 5530 80 ST N B304
CITY-ST-ZIP ST. PETERSBURG FL
TITLE D DELETE
NAME WELCH, DOLORES
STREET ADDRESS 5530 80TH ST. NORTH
CITY-ST-ZIP ST. PETERSBURG FL
TITLE P DELETE
NAME WILLOS, LARRY
STREET ADDRESS 5530 80TH STREET NORTH SUITE B106
CITY-ST-ZIP ST. PETERSBURG FL
TITLE T DELETE
NAME MCGHEE, MARY L
STREET ADDRESS 5530 80TH STREET N. A-108
CITY-ST-ZIP ST. PETERSBURG FL
TITLE VP DELETE
NAME VENCIS, LYNN
STREET ADDRESS 5530 80TH STREET NORTH SUITE A202
CITY-ST-ZIP ST. PETERSBURG FL
TITLE D DELETE
NAME MANUTI, ANNABELE
STREET ADDRESS 5530 80TH STREET NORTH SUITE D306
CITY-ST-ZIP ST. PETERSBURG FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE VP Change Addition
1.2 NAME CHARLOTTE HAYES
1.3 STREET ADDRESS 5530 80th ST N B205
1.4 CITY-ST-ZIP ST. PETERSBURG, FL.
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE
3.2 NAME Willows, Larry
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Mary Ann McShoups* 1/21/97 813-544-5780
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0050662

CR2E037 (9/96)