NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name 725454

(3)

WINSTON PARK NORTHEAST 300/400 ASSOCIATION, INC.

Principal Place of Business		Mailing Address			ı sanını rahın tının əttir didi birir dibi dibit bibit ətbit ətbit öləli səfit dibit səfit				
10033 9TH ST N 2ND FLOOR ST. PETERSBURG FL 33716		10033 9TH ST N 2ND FLOOR ST. PETERSBURG FL 33716							
		on retendono re	3 0710			 Date Incorporated or Qualified 02/02/1973 	3a. D		st Report 1/1995
_	ace of Business	2a. Mailing Address				4. FEI Number			Applied For
21		26			59-1535284 Not Applicab			Not Applicable	
Suite, Apt. #, etc.		Suite, Apt #, etc.			5. Certificate of Status Desired	П	-	75 Additional	
City & State		City & State						e Required	
23		28				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
Zφ	Country	Zip	Coun	trv					ded to Fees
24	25	29	30	.,		8. This corporation has liability for in Florida Statutes	itangibie t] Yes [s. 199.032,
	9. Name and Address of Current					10. Name and Address of New Registered Agent			
			8	31	Name				
OSBURN, BILLY K				32	Chart 6 dd	ress (P.O. Box Number is Not Acceptable			
	RT PROPERTIES INC			32	Street Apor	ress (P.O. Box Number is Not Acceptable	ŋ		
	TH ST N 2ND FL		8	33				-	
ST PETERSBURG FL 33716				-					
			E	34	City		FI	85	Zip Code
or register	to the provisions of Sections 617.0502 led agent, or both, in the State of Florid th, and accept the obligations of, Section	a. Such change was author.	zed by the co	e-n.	amed corpor iration's boar	vation submits this statement for the purp rd of directors. Thereby accept the appo-	ose of ch ritment as	anging its s register	s registered office ed agent. I am
SIGNATURE	Signal ire: typicd or printed name of registerest agent a	net Neutracy i sake: di	TE Registeren A	past.	signature define	u when has during	DATE		
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS CHANGES TO OFFIC	ERS AN	O DIREC	TORS IN 12
THILE	PD Treasurer	DELETE	1.1 TITL	F	1	VP.		Change	e Addition
NAME	GAY, JACK		1.2 NAM	É	1	Tarald HOFF			
STREET ADDRESS	4720 LOCUST ST NE #307		1.3 STR	617	ADDRESS 4	895 Bay St. N, Unit :	307		
CITY-ST-ZIP	ST. PETERSBURG FL		1.4 C(TY	- 51	ZIP 5	st Petershurg, FL			
JIITLE 3111	D	☐ DELETE	2.1 [[]]	f	0	1895 Bay St. N, Unit : 5t Petersburg, FL Ted Reedman		Change	e Addition
NAME	TANIS, ROBERT		2 2 NAM	ŧ	T,	4720 LOCUST Street	M E	: # -	vat.
STREET ADDRESS	4880 LOCUST ST NE #330		2.3 STRE	ŧI.					106
CITY-ST-ZIP	ST. PETERSBURG FL		2 4 CHY		r-ZIP	ot. Peters Durg, FL	337 (<u>03</u>	
TITLE	D	☐ DE1 FTE	3 1 TITLE	E	\mathcal{D}	St. Peters burg, FL Fred Faulkner		Change Change	
NAME	PERRY, HERMAN		3.2 NAM	E		4895 Bayst NE. 51-Petersburg, FL	109		
STREET ADDRESS	4720 LOCUST ST NE #104		3.3 STHE	ET A	ADDRESS	St Poleco by AC	'و	376	73
CITY - ST - ZIP	ST PETERSBURG FL		3.4 C(T)		I ZIP	STITE CONG , PC			
TITLE	VD President	☐ DELETE	4 1 11/11	-				Change	e 🔲 Addition
NAME	GREGORY, NETTIE		4 2 NAN	#E					
STREET ADDRESS	4715 BAY ST NE #335		4.3 STRE	£1.4	ADDRESS				
CITY - ST - ZIP	ST. PETERSBURG FL		4.4 CITY		- ZIF				
TITLE	SD SECOND AND DESCRIPTION	DELETE	5 1 TITLE					☐ Change	E Addition
NAME	FEDAK, MILDRED		5.2 NAM						
STREET ADDRESS	4880 LOCUST ST NE 222		53 STRE	ET A	ADDRESS				
CITY-ST-ZIP	ST PETERSBURG FL		5 4 CiTy		- Z1P				
TITLE	TD	∑ o€re1e	61 TILLE					Change	e 🔲 Addition
NAME	BUCHE ROGER		6.2 NAM	ŀ					:
STREET ADDRESS	4720 BAY ST NE #221		6.3 S1RE	ETA	ADDRESS				
CITY - ST - 7IP	ST. PETERSBURG FI		6.4 CITY	0.1	201				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualfy 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 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER PRINTED TO