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Mar 06 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **726343** (7)
1. Corporation Name
**FIVE TOWNS OF ST. PETERSBURG, NO. 303, INC., A C
ONDOMINIUM**

Principal Place of Business 5750 80 ST. N. ST. PETERSBURG FL 33709-5854	Mailing Address 5750 80TH ST N ST PETERSBURG FL 33709 US
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3. Date Incorporated or Qualified

05/04/1973

4. FEI Number

59-1902184

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HATCHER, PHYLLIS
5750 80TH ST N, B203
ST PETERSBURG FL 33709**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input type="checkbox"/> DELETE
NAME	GRIFFIN, RONALD	
STREET ADDRESS	5750 80TH ST N, C308	
CITY-ST-ZIP	ST PETERSBURG FL	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	

TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	BOLLINGER, JOHN	
STREET ADDRESS	5750 80TH ST N B202	
CITY-ST-ZIP	ST PETERSBURG FL	

2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	VD DENNIS PALAZZOLO
2.3 STREET ADDRESS	5750 80th St N D308
2.4 CITY-ST-ZIP	ST PETERSBURG FL 33709

TITLE	STD	<input type="checkbox"/> DELETE
NAME	HATCHER, PHYLLIS	
STREET ADDRESS	5750 80TH ST N, B203	
CITY-ST-ZIP	ST PETERSBURG FL	

3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	

TITLE	D	<input type="checkbox"/> DELETE
NAME	GERMANO, HENRY	
STREET ADDRESS	5750 80TH ST N B107	
CITY-ST-ZIP	ST PETERSBURG FL	

4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	LINK, MARY	
STREET ADDRESS	5750 80TH ST N B108	
CITY-ST-ZIP	ST PETERSBURG FL	

5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	D GERALD CAIN
5.3 STREET ADDRESS	5750th St N B206
5.4 CITY-ST-ZIP	ST PETERSBURG FL 33709

TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	HUGHES, ROBERT	
STREET ADDRESS	5750 80TH ST N B108	
CITY-ST-ZIP	ST PETERSBURG FL	

6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	D ANTHONY PRINCE
6.3 STREET ADDRESS	5750 80th St N B305
6.4 CITY-ST-ZIP	ST PETERSBURG FL 33709

14. 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 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: *Phyllis Hatcher* **PHYLLIS HATCHER 2-26-98 813-544-9462**

CP2E037 (10/97)