

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 25, 2006 8:00 am
Secretary of State

04-25-2006 90112 047 ****61.25

DOCUMENT # 729747

1. Entity Name

FIVE TOWNS OF ST. PETERSBURG, NO. 305, INC.



Principal Place of Business

5603 80TH ST. N.
APT. 401
ST PETERSBURG FL 33709

Mailing Address

7300 PARK STREET
SEMINOLE FL 33777
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2008957

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

RESOURCE MANAGEMENT, INC.
7300 PARK STREET
SEMINOLE FL 33777

7. Name and Address of New Registered Agent

Name

HAL HILDEBRANDT

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

4175 E BAY DR Ste 205

City

CLEARWATER

FL

Zip Code

33764

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent, and date

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE **P** ☒ Delete
NAME BURRITTI, JOANNE
STREET ADDRESS 5603 80TH ST. N., #212
CITY-ST-ZIP ST PETE FL 33709

TITLE **VT** ☒ Delete
NAME SMITS, ANGELINA
STREET ADDRESS 5303 80TH ST. N, #302
CITY-ST-ZIP ST PETE FL 33709

TITLE **D** ☒ Delete
NAME HEWITT, KATHLEEN
STREET ADDRESS 5303 80TH ST. N, #111
CITY-ST-ZIP ST PETE FL 33709

TITLE **S** ☐ Delete
NAME FULLER, BETTY
STREET ADDRESS 5603 80TH ST. N #412
CITY-ST-ZIP SAINT PETERSBURG FL 33709

TITLE **D** ☒ Delete
NAME GREEN, CATHERINE
STREET ADDRESS 5603 80TH STREET NORTH #116
CITY-ST-ZIP SAINT PETERSBURG FL 33709

TITLE **D** ☐ Delete
NAME BRENNAN, SYLVIA
STREET ADDRESS 5603 80TH ST. N. #214
CITY-ST-ZIP SAINT PETERSBURG FL 33709

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☐ Change ☒ Addition
NAME Peter Petrovitch
STREET ADDRESS 5603 80th St N #406
CITY-ST-ZIP ST PETERSBURG, FL 33709

TITLE **T** ☐ Change ☐ Addition
NAME SHARON MORRISON
STREET ADDRESS 5603 80th St N #312
CITY-ST-ZIP ST PETE, FL 33709

TITLE **O** ☐ Change ☐ Addition
NAME MAUR JANSKO
STREET ADDRESS 5603 80th St N #406
CITY-ST-ZIP ST PETERSBURG FL 33709

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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:

Betty Fuller