FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mertifam

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(2)

THE PLACIDO GARDENS CONDOMINIUM ASSOCIATION, INC

FILED Mar 27 1998 8:00am Secretary of State

|--|--|--|

Principal Plac	e of Business	Mailing Address			r regelt, energ geffen gette gette jatte gant grant didtt defen detti dette bibli tidet
4435 FIRST ST		8141 54TH AVE. N.			3. Date Incorporated or Qualified
ST PETERSBUR	G FL 33713	ST. PETERSBURG FL 33709			04/10/1979
		U\$			4. FEI Number Applied For
					59-1948825 Not Applicable
2. Principal P	ace of Business	2a. Mailing Address			5. Certificate of Status Desired \$8.75 Additional Fee Required
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			Election Campaign Financing \$5.00 May Be
22		27			Trust Fund Contribution Added to Fees
City & Stat	e	City & State			7. Is this nonprofit corporation a homeowners association?
23		28			☐ Yes ☐ No
Zip	Country	Zip	Count	Ϋ́	8. This corporation owes or has paid the current year intangible
24	9. Name and Address of Current	11	0		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
	S. Harris and Address of Current	negistered Agent	- 8	1 Name	
LIOTT 6	NIOANI		Ľ	,,,,,,,,,	LYN SORENSEN
HIOTT, S	DPERTY ASSET MANAGEMENT		8	2 Street A	Address (P.O. Box Number is Not Acceptable) 8141 54th AVENUE N
	TH AVENUE N		8	3	OI41 J4CH AVENUE N
	ERSBURG FL 33709		Ľ		
			8		ST. PETERSBURG FL 85 Zip Code 33709
11. Pursuant	to the provisions of Sections 617,0502	and 617.1508, Florida Statutes	the abo	ve-named	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
agent. I a	egistered agent, or both, in the State (m familiar with, and accept the obliga	of Florida. Such change was au tions of, Section 617.0503, Flori	tnorizea i da Statut	by the corp es	poration's board of directors. I hereby accept the appointment as registered
SIGNATURE		7	epn		1-20-98
				gent signature	required when reinstating) DATE
12.		CHECT REP 1	13.	·····	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD FOTOGRALD FONA	□ DELETE	1.1 TITLE]	Change L. Addition
NAME	FITZGERALD, EDNA 4435 FIRST ST NE #306		1.2 NAMI	1	
STREET ADDRESS	ST PETERSBURG FL 33703			ET ADDRESS	
CITY-ST-ZIP TITLE	D	□ DELETE	1.4 CITY		VP↑ KI Change
NAME	WHEATLAND, STANLEY	CA Detect	2.1 IIILE	I	· ··· <i>y</i>
STREET ADDRESS	4435 FIRST ST NE #309			ET ADDRESS	STANLEY WHEATLAND
	ST PETERSBURG FL 33703			I	4435 lst STREET N.E., #309
CITY-ST-ZIP TITLE	VPD		2. 4 CITY 3.1 TITLE		ST. PETERSBURG, FL. 337703
NAME I	FITGERALD, BERNARD		3.2 NAMI	J	stanton
STREET ADDRESS	4435 FIRST ST NE #306			ET ADDRESS	
CITY-ST-ZIP	ST PETERSBURG FL 33703		3.4. CITY		
TITLE	D	DELETE	4.1 TITLE		s D
NAME	AYDELOTT, FRANCES	••	4. 2 NAM	E [FRANCES AYDELOTT
STREET ADDRESS	4435 FIRST ST NW #305		4.3 STRE	ET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33703		4.4 CITY	ST-ZIP	4435 1st STREET N.E., #305
TITLE		DELETE	5.1 TITLE		ST. PETERSBURG, FL. 33703
NAME	•		5.2 NAM	: 	JENNIE BAMBERGER
STREET ADDRESS			5.3 STRE	ET ADDRESS	4435 1st STREET N.E., #211
CITY-ST-ZIP			5.4 CITY	ST-ZIP	ST DETERCITED TO 22702
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME	: [987.27 DEP 46/25
STREET ADDRESS			6.3 STRE	T ADDRESS	13.0
CITY-ST-2IP			6.4 CITY	ST-ZIP	Det 76.00

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 cath; 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.