

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 02, 2004 8:00 am
Secretary of State

04-02-2004 90050 013 ****61.25

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1. Entity Name

ST. MARY 18-21 CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

4200 4TH STREET NORTH
ST PETERSBURG FL 33703

Mailing Address

4200 4TH STREET NORTH
ST PETERSBURG FL 33703

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

20-0826727

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROWAN, JAMES J
3839 4TH STREET NORTH SUITE 390
ST PETERSBURG FL 33703

Name

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

City

FL

Zip Code

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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 PD
NAME DOYLE, DANIEL M ☒ Delete
STREET ADDRESS 7 STONEGATE DR
CITY-ST-ZIP BELLEAIR FL 33756

TITLE TD
NAME BARGER, MICHAEL E ☐ Delete
STREET ADDRESS 4200 4TH STREET NORTH SUITE D
CITY-ST-ZIP ST PETERSBURG FL 33703

TITLE D
NAME ROWAN, JAMES J ☒ Delete
STREET ADDRESS 3839 4TH ST N SUITE 390
CITY-ST-ZIP ST PETERSBURG FL 33703

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Change ☒ Addition
NAME WAT H. TYLER
STREET ADDRESS 202 INDUSTRIAL PARK LANE
CITY-ST-ZIP COLLIERVILLE, TN 38017

TITLE D ☐ Change ☒ Addition
NAME ERNEST J. MANNERINO
STREET ADDRESS 202 INDUSTRIAL PARK LANE
CITY-ST-ZIP COLLIERVILLE, TN 38017

TITLE D ☐ Change ☒ Addition
NAME JAY W. GORDON
STREET ADDRESS 202 INDUSTRIAL PARK LANE
CITY-ST-ZIP COLLIERVILLE, TN 38017

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 exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-10-04 727-520-7711

Date

Daytime Phone #