

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

FILED
Feb 12, 2004 8:00 am
Secretary of State

02-12-2004 90037 019 ****61.25

DOCUMENT # 736931

1. Entity Name

**THE PARADISE SHORES SOCIAL AND SERVICE CLUB,
INC.**



Principal Place of Business

**5230 81ST ST NORTH
ST PETERSBURG FL 33709**

Mailing Address

**5230 81ST ST NORTH
ST PETERSBURG FL 33709**

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

59-1689504

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

**NIEMI, JOAN
5246 N 81 ST #17
ST PETERSBURG FL 33709**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

T
TITLE NAME
SMALLEY, ELTON B. ☐ Delete
STREET ADDRESS
5286 81ST STREET NORTH, APT. #9
CITY-ST-ZIP
ST. PETERSBURG FL

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

P
TITLE NAME
NIEMI, JOAN ☐ Delete
STREET ADDRESS
5246 N 81 ST #17
CITY-ST-ZIP
ST PETERSBURG FL

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

S
TITLE NAME
SCHOMER, ORA ☐ Delete
STREET ADDRESS
5267 81ST ST N
CITY-ST-ZIP
ST PETERSBURG FL

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

D
TITLE NAME
RYAN, LINDA ☐ Delete
STREET ADDRESS
5286 81ST N., APT #9
CITY-ST-ZIP
SAINT PETERSBURG FL 33709

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

D
TITLE NAME
AGNELLO, DOROTHY ☒ Delete
STREET ADDRESS
5356-81ST ST., NO. APT. 1
CITY-ST-ZIP
ST PETERSBURG FL

☒ Change ☐ Addition
TITLE NAME
STREET ADDRESS
CITY-ST-ZIP
**BOHNE Virginia
5246 81ST ST NOR, APT-16
ST PETERSBURG, FLA**

VP
TITLE NAME
LOPEZ, PETER ☐ Delete
STREET ADDRESS
5246 N. 81ST N., APT #14
CITY-ST-ZIP
SAINT PETERSBURG FL 33709

☐ Change ☐ Addition
TITLE 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: *Joan Niemi* **JOAN NIEMI**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-7-04

Date

727-544-4854

Daytime Phone #