

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709264

Entity Name: TOWN APARTMENTS, INC. NO. 4, A CONDOMINIUM**Current Principal Place of Business:**1900 61ST AVE N
ST PETERSBURG, FL 33714**Current Mailing Address:**1900 61ST AVE N
ST PETERSBURG, FL 33714**FEI Number: 59-2875646****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**PAINTER, CLAYTON B
5940 21ST STREET NORTH
SAINT PETERSBURG, FL 33714 US*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.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	D
Name	REID, GLENN
Address	5940 21ST ST NO #17
City-State-Zip:	SAINT PETERSBURG FL 33714

Title	VP/D
Name	GRECH, CHRIS
Address	5940 21ST STREET NORTH #10
City-State-Zip:	SAINT PETERSBURG FL 33714

Title	PD
Name	PAINTER, CLAYTON
Address	5940 21ST STREET NORTH
City-State-Zip:	SAINT PETERSBURG FL 33714

Title	TREASURER
Name	KELLY, RICK
Address	5940 21ST STREET N E16
City-State-Zip:	ST PETERSBURG FL 33714

Title	DIRECTOR
Name	BENNET, TONI
Address	5940 21ST STREET N E12
City-State-Zip:	ST PETERSBURG FL 33714

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CLAYTON PAINTER**PRES****06/07/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date