

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 718802

**Entity Name:** PORT BELLEAIR NO.3, INC., A CONDOMINIUM

**Current Principal Place of Business:**

5901 SUN BLVD  
103  
ST.PETERSBURG, FL 33715

**Current Mailing Address:**

5901 SUN BLVD  
103  
ST.PETERSBURG, FL 33715 US

**FEI Number:** 59-1981427

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

RABIN & PARKER, P.A.  
28163 US HWY 19N  
SUITE 207  
CLEARWATER, FL 33761 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            PRESIDENT  
Name            ANDERSON, LARRY  
Address        5901 SUN BLVD  
                  103  
City-State-Zip: ST.PETERSBURG FL 33715

Title            VP  
Name            STRATTON, LEE  
Address        5901 SUN BLVD  
                  103  
City-State-Zip: ST.PETERSBURG FL 33715

Title            SECRETARY  
Name            TUCKER, MARY ALICE  
Address        5901 SUN BLVD  
                  103  
City-State-Zip: ST.PETERSBURG FL 33715

Title            TREASURER  
Name            ESSEX, DEBBIE  
Address        5901 SUN BLVD  
                  103  
City-State-Zip: ST.PETERSBURG FL 33715

Title            DIRECTOR  
Name            WALTHER, ERVIN  
Address        5901 SUN BLVD  
                  103  
City-State-Zip: ST.PETERSBURG FL 33715

Title            DIRECTOR  
Name            CROCKETT, WALTER  
Address        5901 SUN BLVD  
                  103  
City-State-Zip: ST.PETERSBURG FL 33715

*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:** LARRY ANDERSON

**PRESIDENT**

**03/28/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date