

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724590

Entity Name: PATRIOT SQUARE CONDOMINIUM ASSOCIATION OF ST. PETERSBURG, FLORIDA, INC.**FILED**
Apr 14, 2016
Secretary of State
CC5746212244**Current Principal Place of Business:**7300 PARK STREET
SEMINOLE, FL 33777**Current Mailing Address:**C/O RESOURCE PROPERTY MGMT
7300 PARK ST
SEMINOLE, FL 33777**FEI Number: 59-1406123****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**RABIN & PARKER, P.A.
28163 US HWY 19 NORTH
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	P
Name	AUSTIN, SEAN
Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777

Title	1VP
Name	NICHOLS, JOYCE
Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777

Title	DIRECTOR
Name	KIDD, LESLEY
Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777

Title	TREASURER, 2VP
Name	LEWIS, BARBARA
Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777

Title	D, SECRETARY
Name	DEWEY, CAROL
Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777

Title	DIRECTOR
Name	JAYNES, CHARLES
Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777

Title	DIRECTOR
Name	HENRY, RUTHANNE
Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777

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: SEAN AUSTIN**PRESIDENT****04/14/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date