

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 726343

**Entity Name:** FIVE TOWNS OF ST. PETERSBURG, NO. 303, INC., A  
CONDOMINIUM**Current Principal Place of Business:**5750 80TH ST N  
ST PETERSBURG, FL 33709**Current Mailing Address:**8141 54TH AVE N  
ST PETERSBURG, FL 33709 US**FEI Number: 59-1902184****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ZACUR, RICHARD A  
5200 CENTRAL AVE  
ST PETERSBURG, FL 33737 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            HOGAN, MICHAEL  
Address        5750 80TH ST N D207  
City-State-Zip: ST PETERSBURG FL 33709

Title            DIRECTOR  
Name            COOPER, GARY C  
Address        5750 80TH ST N C-201  
City-State-Zip: ST PETERSBURG FL 33709

Title            DIRECTOR  
Name            STOFER, KAREN  
Address        5750 80TH ST N  
                  C-107  
City-State-Zip: ST PETERSBURG FL 33709

Title            TREASURER  
Name            KRAFT, JEFFREY C TREASURER  
Address        5750 80TH ST N  
                  A-206  
City-State-Zip: ST PETERSBURG FL 33709

Title            DIRECTOR  
Name            PALAZZOLO, DENNIS  
Address        5750 80TH ST N  
                  D-208  
City-State-Zip: ST PETERSBURG FL 33709

Title            VP  
Name            LYNCH, NICOLA  
Address        5750 80TH ST. N.  
                  B-304  
City-State-Zip: ST. PETERSBURG FL 33709

Title            SECRETARY  
Name            DEBOE-HENNINGER, DONNA  
Address        5750 80TH ST N.  
                  B-306  
City-State-Zip: ST. PETERSBURG FL 33709

*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: MICHAEL HOGAN****PRESIDENT****01/25/2018**

Electronic Signature of Signing Officer/Director Detail

Date