

2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 729747

Entity Name: FIVE TOWNS OF ST. PETERSBURG, NO. 305, INC.

Current Principal Place of Business:

5603 80TH ST. N.
APT. 401
ST PETERSBURG, FL 33709

Current Mailing Address:

C/O ASSOCIA GULF COAST
9887 FOURTH STREET NORTH SUITE 301
ST. PETERSBURG, FL 33702 US

FEI Number: 59-2008957

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASSOCIA GULF COAST, INC.
9887 FOURTH STREET NORTH
SUITE 301
ST. PETERSBURG, FL 33702 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: MICHAEL FLEMING

05/06/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name NOLAN, HARRY
Address C/O ASSOCIA GULF COAST
9887 FOURTH STREET NORTH SUITE
301
City-State-Zip: ST. PETERSBURG FL 33702

Title VP
Name CAROLA, FRANK
Address C/O ASSOCIA GULF COAST
9887 FOURTH STREET NORTH SUITE
301
City-State-Zip: ST. PETERSBURG FL 33702

Title T
Name RUEST, CHERIE
Address C/O ASSOCIA GULF COAST
9887 FOURTH STREET NORTH SUITE
301
City-State-Zip: ST. PETERSBURG FL 33702

Title S
Name WARD, DIANA
Address C/O ASSOCIA GULF COAST
9887 FOURTH STREET NORTH SUITE
301
City-State-Zip: ST. PETERSBURG FL 33702

Title D
Name GOLDSTEIN, ROBERT
Address C/O ASSOCIA GULF COAST
9887 FOURTH STREET NORTH SUITE
301
City-State-Zip: ST. PETERSBURG FL 33702

Title D
Name GREEN, CATHERINE
Address C/O ASSOCIA GULF COAST
9887 FOURTH STREET NORTH SUITE
301
City-State-Zip: ST. PETERSBURG FL 33702

Title D
Name VAIL, JANET
Address C/O ASSOCIA GULF COAST
9887 FOURTH STREET NORTH SUITE
301
City-State-Zip: ST. PETERSBURG FL 33702

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: HARRY NOLAN

PRESIDENT

05/06/2016

