2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Nov 18, 2019
Secretary of State
8542804953CC

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: JOHN HENSLEY 11/18/2019

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PD	Title	VP
Name	NOLAN, HARRY	Name	GOLDSTEIN, ROBERT
Address	C/O ASSOCIA GULF COAST 9887 FOURTH STREET NORTH SUITE 301	Address	C/O ASSOCIA GULF COAST 9887 FOURTH STREET NORTH SUITE 301
City-State-Zip:	ST. PETERSBURG FL 33702	City-State-Zip:	ST. PETERSBURG FL 33702
Title	TREASURER	Title	SECRETARY
Name	NORMAN, BILLIE L	Name	TOMESKO, SHIRLEY
Address	C/O ASSOCIA GULF COAST 9887 FOURTH STREET NORTH SUITE 301	Address	C/O ASSOCIA GULF COAST 9887 FOURTH STREET NORTH SUITE 301
City-State-Zip:	ST. PETERSBURG FL 33702	City-State-Zip:	ST. PETERSBURG FL 33702
Title	DIRECTOR	Title	DIRECTOR
Name	CINAL, TERRY	Name	VAIL, JANET
Address	C/O ASSOCIA GULF COAST 9887 FOURTH STREET NORTH SUITE 301	Address	C/O ASSOCIA GULF COAST 9887 FOURTH STREET NORTH SUITE 301
City-State-Zip:	ST. PETERSBURG FL 33702	City-State-Zip:	ST. PETERSBURG FL 33702
Title	DIRECTOR		
Name	PALM, DEBORAH		
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 11/18/2019

Electronic Signature of Signing Officer/Director Detail Date