

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747861

Entity Name: FRENCH QUARTER NORTH CONDOMINIUM ASSOCIATION, INC.**FILED**
Apr 02, 2025
Secretary of State
9426319645CC**Current Principal Place of Business:**9887 4TH STREET NORTH
SUITE 301
ST PETERSBURG, FL 33702**Current Mailing Address:**C/O PBM
10033 DR. MARTIN LUTHER KING ST N 300
SAINT PETERSBURG, FL 33716 US**FEI Number: 59-1928593****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**PROFESSIONAL BAYWAY MANAGEMENT
C/O PBM
10033 DR. MARTIN LUTHER KING ST N 300
SAINT PETERSBURG, FL 33716 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: BLAIR NEWTON****04/02/2025**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	TREASURER
Name	MCFERRIN, WILLIAM
Address	C/O PBM 10033 DR. MARTIN LUTHER KING ST N 300
City-State-Zip:	SAINT PETERSBURG FL 33716

Title	PRESIDENT
Name	MYERS, DAVID
Address	C/O PBM 10033 DR. MARTIN LUTHER KING ST N 300
City-State-Zip:	SAINT PETERSBURG FL 33716

Title	SECRETARY
Name	MALONEY, JENNIFER
Address	C/O PBM 10033 DR. MARTIN LUTHER KING ST N 300
City-State-Zip:	SAINT PETERSBURG FL 33716

Title	VP
Name	MCFERRIN, WILLIAM
Address	C/O PBM 10033 DR. MARTIN LUTHER KING ST N 300
City-State-Zip:	SAINT PETERSBURG FL 33716

Title	DIRECTOR
Name	LESZCYNski, MARK
Address	C/O PBM 10033 DR. MARTIN LUTHER KING ST N 300
City-State-Zip:	SAINT PETERSBURG FL 33716

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: DAVID MYERS**PRES****04/02/2025**

Electronic Signature of Signing Officer/Director Detail

Date