Entity Name: ST. PETERSBURG COLLEGE FOUNDATION, INC.

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

244 SECOND AVENUE NORTH ST. PETERSBURG, FL 33701

DOCUMENT# 749635

Current Mailing Address:

PO BOX 13489 SAINT PETERSBURG, FL 33733 US

FEI Number: 59-1954362

Name and Address of Current Registered Agent:

GARDNER, SUZANNE L 244 SECOND AVENUE NORTH ST. PETERSBURG, FL 33701 US

Date

Certificate of Status Desired: No

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

Officer/Director Detail :

Title	D	Title	D
Name	BLANTON, JOSEPH G	Name	MCCLOUD, BILL
Address	880 CARILLON PARKWAY	Address	18740 HILLSTONE DRIVE
City-State-Zip:	CLEARWATER FL 33716	City-State-Zip:	ODESSA FL 33556
Title Name	D HORNER, BETH A	Title Name	CHAIRMAN SHEPARD, STEVEN R
Address	601 BAYSHORE BLVD. SUITE 960	Address City-State-Zip:	570 CARILLON PARKWAY ST. PETERSBURG FL 33716
City-State-Zip:	TAMPA FL 33606		
Title	D	Title Name	D CARROLL, MICHAEL R
Name	WINNING, RICHARD B	Address	555 5TH AVENUE NE, #811
Address	10490 GANDY BLVD. NORTH	City-State-Zip:	ST. PETERSBURG FL 33701
City-State-Zip:	ST. PETERSBURG FL 33702	Title	TREASURER
Title	SECRETARY	Name	MEIGS, MICHAEL
Name	TURTLE, JESSE	Address	P.O. BOX 13489
Address	244 SECOND AVENUE NORTH	City-State-Zip:	
City-State-Zip:	ST. PETERSBURG FL 33701	- , <u></u>	
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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: JESSE TURTLE

SECRETARY

03/22/2021

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail Continued :

Title	D	Title	D
Name	BOMSTEIN, JOSHUA	Name	BOYKINS, JOHNNY V
Address	620 DREW STREET	Address	11300 4TH STREET NORTH
City-State-Zip:	ST PETERSBURG FL 33755	City-State-Zip:	ST PETERSBURG FL 33716
Title	D	Title	D
Name	WARSHOF, RICHARD	Name	STONECIPHER, NATHAN
Address	5130 BRITTANY DRIVE SOUTH, #903	Address	2470 6TH AVENUE NORTH
City-State-Zip:	ST. PETERSBURG FL 33715	City-State-Zip:	ST. PETERSBURG FL 33713
Title	D	Title	DIRECTOR
Name	WILLIAMS, TONJUA	Name	BOLAND, JACLYN
Address	P.O. BOX 13489	Address	612 FRANKLIN STREET
City-State-Zip:	ST PETERSBURG FL 33733	City-State-Zip:	CLEARWATER FL 33756
Title	DIRECTOR		

Address 5201 W. KENNEDY BLVD. SUITE 600

SIMMONS, BEMETRA

Name

City-State-Zip: TAMPA FL 33609