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.

Ρ

SIGNATURE: GALLAWAY, JENNIFER

Electronic Signature of Signing Officer/Director Detail

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0300008801

Entity Name: SOUTH TOWN RESERVE ASSOCIATION, INC.

Current Principal Place of Business:

316 S MCDILL TAMPA, FL 33606

Current Mailing Address:

PO BOX 10217 TAMPA, FL 33679

FEI Number: 59-3699767

Name and Address of Current Registered Agent:

APPLETON, ERIC 1801 N HIGHLAND AVE TAMPA, FL 33602 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

Officer/Director Detail :

Title	Р	Title	V.P.
Name	GALLAWAY, JENNIFER	Name	ARTALE, TINA
Address	PO BOX 10217	Address	PO BOX 10217
City-State-Zip:	TAMPA FL 33679	City-State-Zip:	TAMPA FL 33679
Title	T/S		
Name	BEYER, BOB		
Address	PO BOX 10217		
City-State-Zip:	TAMPA FL 33679		

Certificate of Status Desired: No

FILED May 05, 2015 Secretary of State CC9968334504

> 05/05/2015 Date

Date