

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000009988

**Entity Name:** SPARK 5, INC.

**Current Principal Place of Business:**

324 GROVE STREET N  
# 200  
SAINT PETERSBURG, FL 33701

**Current Mailing Address:**

324 GROVE STREET N  
# 200  
SAINT PETERSBURG, FL 33701 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

ROY, MELISSA A  
324 GROVE STREET N  
# 200  
SAINT PETERSBURG, FL 33701 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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name ROY, MELISSA A  
Address 324 GROVE STREET N  
# 200  
City-State-Zip: SAINT PETERSBURG FL 33701

Title VP  
Name ANDRIEU, JAMIE L  
Address 2400 FEATHERSOUND DRIVE #127  
City-State-Zip: CLEARWATER FL 33762

Title TREA  
Name STEIMLE, ERIC  
Address 3974 14TH STREET NE  
City-State-Zip: SAINT PETERSBURG FL 33703

Title S  
Name DUNHAM, NICOLE  
Address 320 31ST AVE NORTH  
City-State-Zip: SAINT PETERSBURG FL 33704

*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:** MELISSA A ROY

**PRESIDENT**

**04/29/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date