## **2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000000714

Entity Name: ST. PETERSBURG WOODCRAFTERS GUILD, INC.

FILED
Mar 12, 2022
Secretary of State
3010339758CC

Date

Date

## **Current Principal Place of Business:**

4056 BRIDGEPORT DR SAFETY HARBOR. FL 34695

## **Current Mailing Address:**

4056 BRIDGEPORT DR

SAFETY HARBOR, FL 34695 US

FEI Number: 47-2898994 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

VROMAN, CHARLES 4056 BRIDGEPORT DR SAFETY HARBOR, FL 34695 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: CHARLES VROMAN 03/12/2022

Electronic Signature of Registered Agent

Officer/Director Detail:

Title SECRETARY, DIRECTOR Title PRESIDENT

NameNESS, DAVIDNameVROMAN, CHARLESAddress3041 RAINBOW CTAddress4056 BRIDGEPORT DR

City-State-Zip: SAFETY HARBOR FL 34695 City-State-Zip: SAFETY HARBOR FL 34695

Title TREASURER, DIRECTOR Title DIRECTOR

Name STOKES, MARJORIE Name LANKFORD, LELAND C

Address 34182 CANAL DR N Address 1012 CASLER AV

City-State-Zip: PINELLAS PARK FL 33781 City-State-Zip: CLEARWATER FL 33755

Title DIRECTOR Title DIRECTOR, VP
Name NOTO, PHILIP Name CROOK, GARY R
Address 14221 113TH AV N Address 8450 140TH ST N

City-State-Zip: LARGO FL 33774 City-State-Zip: SEMINOLE FL 33776

Title DIRECTOR

Name MONSON, RAYMOND
Address 311 LIVE OAK DR

City-State-Zip: LARGO FL 33770

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: MARJORIE L STOKES TREASURER 03/12/2022