2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20000012523

Entity Name: ST. PETERSBURG PRIMARY SCHOOL, INC.

FILED
Jan 10, 2024
Secretary of State
2013915925CC

Current Principal Place of Business:

700 N SHORE DR NE # 108 ST PETERSBURG, FL 33701

Current Mailing Address:

700 N SHORE DRIVE NE

108

ST. PETERSBURG. FL 33701 US

FEI Number: 85-3969788 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC. 7901 4TH STREET NORTH ST PETERSBURG, FL 33702 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 DIRECTOR Title TREASURER

Name HARDY, ASHLEY Name DELOZIER, BENJAMIN E II

Address 700 N SHORE DR NE # 108 Address 405 19TH AVE NE

City-State-Zip: ST PETERSBURG FL 33701 City-State-Zip: ST PETERSBURG FL 33704

Title P Title V

Name GRIFFIN, ALAIS Name HELCK, GREG
Address 740 12TH AVENUE N Address 240 26TH AVE N

City-State-Zip: ST PETERSBURG FL 33701 City-State-Zip: ST PETERSBURG FL 33704

Title TRUSTEE Title TRUSTEE

Name LOH, ELIZABETH Name RUTSTEIN, BRANDON

Address 200 ALORA ST NE Address 2320 1ST ST N.

City-State-Zip: ST PETERSBURG FL 33704 City-State-Zip: ST PETERSBURG FL 33704

Title TRUSTEE Title SECRETARY

NameFALCONE, NICKNameGONZALEZ, JENNIFERAddress3315 13TH AVE NEAddress4054 BAYSHORE BLVD. NECity-State-Zip:ST PETERSBURG FL 33701City-State-Zip:ST PETERSBURG FL 33703

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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: ASHLEY HARDY HEAD OF SCHOOL

Electronic Signature of Signing Officer/Director Detail

01/10/2024 Date

Officer/Director Detail Continued:

Title TRUSTEE Title TRUSTEE

Name DOZARK, TARA Name SOMERMAN, RACHEL

Address 345 12TH AVE NE Address 7010 15TH ST N

City-State-Zip: ST PETERSBURG FL 33701 City-State-Zip: ST PETERSBURG FL 33702