

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707323

FILED  
Jan 10, 2006  
Secretary of State

Entity Name: ST. PETERSBURG PANHELLENIC ASSOCIATION, INC.

**Current Principal Place of Business:**

4549 14TH WAY NE  
SAINT PETERSBURG, FL 33703 US

**New Principal Place of Business:**

**Current Mailing Address:**

4549 14TH WAY NE  
SAINT PETERSBURG, FL 33703 US

**New Mailing Address:**

FEI Number: 59-0490067

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COSGROVE, MALORA M  
4549 14TH WAY NE  
SAINT PETERSBURG, FL 33703 US

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

LINS, PATRICIA J  
4549 14TH WAY NE  
SAINT PETERSBURG, FL 33703 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: PATRICIA J. LINS

01/10/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: DEWAN, CAROL  
Address: 3200 BAYOU PLACIDE BLVD NE  
City-St-Zip: SAINT PETERSBURG, FL 33706

Title: VD ( ) Delete  
Name: COSGROVE, MALORA  
Address: 1220 4TH ST E  
City-St-Zip: SAINT PETERSBURG, FL 33706

Title: TD ( ) Delete  
Name: LINS, PAT  
Address: 4549 14TH WAY NE  
City-St-Zip: SAINT PETERSBURG, FL 33706 US

Title: SD ( ) Delete  
Name: MC INTYRE, ANN  
Address: 7500 SUNSHINE SKYWAY LN #206  
City-St-Zip: SAINT PETERSBURG, FL 33711

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: NEELY, MERRIE B  
Address: 29763 70TH ST N  
City-St-Zip: CLEARWATER, FL 33761

Title: VD (X) Change ( ) Addition  
Name: WOODARD, MAUREEN  
Address: 4425 44TH ST S  
City-St-Zip: SAINT PETERSBURG, FL 33711

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: BARNES, CAROL  
Address: 1101 79TH ST S  
City-St-Zip: SAINT PETERSBURG, FL 33707

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PATRICIA J. LINS

TD

01/10/2006

Electronic Signature of Signing Officer or Director

Date