2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

4/7

FILED
May 16, 2006 8:00 am
Secretary of State
04-26-2006 90225 036 ****61.25

DOCUMENT # 726344

1. Entity Name

FIVE TOWNS OF ST. PETERSBURG, NO. 304, INC.

Principal Place of Business	Mailing Address
5521 80 STREET N. APT 412 APT. 301 ST PETERSBURG FL 33709-829 US	8141-54TH AVENUE NORTH SAINT PETERSBURG FL 33709 US

1st MOORE CR2E037 (10/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1632106 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FOLEY, SEAN M
8141 54TH AVENUE NORTH
SAINT PETERSBURG FL 33709

7. Name and Address of New Registered Agent

Name HAL HILDEBRANDT

Street Address (P.O. Box Number is Not Acceptable) 4175 E BAY DR Ste 205

City CLEARWATER FL Zip Code 33764

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Hal Hildebrandt

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Pres. Director HARRISON, MARION 5521 80 ST N #311 SAINT PETERSBURG FL 33709	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T GLANDING, MARGIE 5521 80TH ST. N, #416 SAINT PETERSBURG FL 33709	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Treas. MARGIE GLANDING 5521 80th ST N 416 ST Petersburg, FL 33709	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V HODGE, EDWARD 5521 80 ST N #301 SAINT PETERSBURG FL 33709	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P JOHN STARK 5521 80th ST N #206 ST Pete, FL 33709	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HEAD, PHYLLIS 5521 80TH ST N #315 SAINT PETERSBURG FL 33709	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WARNES, ROSS 5521 80 ST N #511 SAINT PETERSBURG FL 33709	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MARION JOYCE 5521 80th ST N #515 ST Pete, FL 33709	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P MCCLANE, PEGGIE 5521 80 ST N #514 SAINT PETERSBURG FL 33709	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Eleanore Pallicer 5521 80th ST N ST Pete, FL 33709	☐ Change ☒ Addition #310

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Margie Glanding Treasurer 4-11-06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #