


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 27, 2006 8:00 am**  
**Secretary of State**

01-27-2006 90021 027 \*\*\*\*61.25

**DOCUMENT # 730197**

1. Entity Name  
**HISTORIC OLD NORTHEAST NEIGHBORHOOD ASSOCIATION OF ST. PETERSBURG, INC.**



Principal Place of Business  
**P O BOX 76324  
 ST PETERSBURG, FL 33734-324 US**

Mailing Address  
**P O BOX 76324  
 ST PETERSBURG, FL 33734-324 US**

2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State  
 Zip Country



01172006 Chg-NP CR2E037 (11/05)

4. FEI Number  
**23-7405683**

Applied For  
 Not Applicable

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

**6. Name and Address of Current Registered Agent**

**MARTIN, CATHERINE B  
 111 SECOND AVENUE NE #704  
 ST PETERSBURG, FL 33701**

**7. Name and Address of New Registered Agent**

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

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

**Filing 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**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MARTIN, CATHERINE B 111 SECOND AVE NE #704 ST. PETERSBURG, FL 33701 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD HAAN, DOUGLAS 156 NINTH AVENUE NORTH ST. PETERSBURG, FL 33701 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CASTLE, RICHARD R 220 - 11TH AVENUE NE ST. PETERSBURG, FL 33701 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HENDERSON, QUINN 365 - 17TH AVENUE NE ST. PETERSBURG, FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D JOHNSON, BRIAN 435 - 16TH AVENUE NE ST. PETERSBURG, FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KIPP, STEVE 212 - 11TH AVENUE NORTH ST. PETERSBURG, FL 33701 <input type="checkbox"/> Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

**See attached sheet for complete list**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:** Catherine B Martin 1/20/06 727 84 81656  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

# ATTACHMENT

60006848

Attachment to 2006 Annual Report

Document #730197

HISTORIC OLD NORTHEAST NEIGHBORHOOD ASSOCIATION OF ST. PETERSBURG,  
INC.

## Title Name & Address

SD Anne-Marie Stephenson, 235 12<sup>th</sup> Avenue NE, St. Petersburg, FL 33701

D Bob Dobbs, 2296 Coffee Pot Blvd., St. Petersburg, FL 33704

D Bob Hunter, 229 18<sup>th</sup> Avenue NE, St. Petersburg, FL 33704

D Brian E. Johnson, 435 16<sup>th</sup> Avenue NE, St. Petersburg, FL 33704

PD Catherine B. Martin, 111 Second Avenue NE #704, St. Petersburg, FL 33701

VPD Chuck E. Lindeen, 115 11<sup>th</sup> Avenue N, St. Petersburg, FL 33701

TD Douglas C. Haan, 325 8<sup>th</sup> Avenue NE, St. Petersburg, FL 33701

D Mary Alice Lange, 526 15<sup>th</sup> Avenue NE, St. Petersburg, FL 33704

D Nicole E. Durkin, 218 21<sup>st</sup> Avenue N, St. Petersburg, FL 33704

D Nona B. Peebles, 136 19<sup>th</sup> Avenue NE, St. Petersburg, FL 33704

D Quinn A. Henderson, 365 17<sup>th</sup> Avenue NE, St. Petersburg, FL 33704

D Rick Carson, 1035 Cherry Street NE, St. Petersburg, FL 33701

D Robin L. Reed, 705 16<sup>th</sup> Avenue NE, St. Petersburg, FL 33704

D Stephen W. Kipp, 212 11<sup>th</sup> Avenue N., St. Petersburg, FL 33701