

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733964

FILED
Jan 13, 2009
Secretary of State

Entity Name: FIVE TOWNS OF ST. PETERSBURG, NO. 308, INC.

Current Principal Place of Business:

5725 - 80TH STREET NORTH
ST. PETERSBURG, FL 33709

New Principal Place of Business:

Current Mailing Address:

5725 - 80TH STREET NORTH
#401
ST. PETERSBURG, FL 33709

New Mailing Address:

FEI Number: 59-2060501

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PINZKER, EDWARD
5725- 80TH ST N
#214
ST. PETERSBURG, FL 33709 US

Name and Address of New Registered Agent:

NICKNAIR, HAROLD
5725- 80TH ST N
#411
ST. PETERSBURG, FL 33709 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: HAROLD NICKNAIR

01/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PINZKER, EDWARD,
Address: 5725-80TH ST N #214
City-St-Zip: ST PETERSBURG, FL 33709

Title: D () Delete
Name: KLASSON, BARBARA
Address: 5725 80TH ST N # 408
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: D () Delete
Name: HEINLE, SYLVIA
Address: 5725 80TH STREET N #410
City-St-Zip: ST. PETERSBURG, FL 33709

Title: D () Delete
Name: FAIREY, LINDA
Address: 5725 80TH STREET N. #416
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: S () Delete
Name: BURKEEN, ELAINE
Address: 5725 80TH STREET NORTH #115
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: VPT () Delete
Name: RENNEKER, EDWARD
Address: 5725 80TH ST N, #401
City-St-Zip: ST. PETERSBURG, FL 33709

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NICKNAIR, HAROLD P
Address: 5725-80TH ST N #411
City-St-Zip: ST PETERSBURG, FL 33709

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

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

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Name:
Address:
City-St-Zip:

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

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

I hereby certify that the information supplied with this filing does not qualify 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: EDWARD RENNEKER

VPT

01/13/2009

Electronic Signature of Signing Officer or Director

Date