2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2008
Secretary of State

DOCUMENT# 762526

Entity Name: 13TH STREET HEIGHT NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business:

1601 12TH STREET SOUTH
ST. PETERSBURG, FL 33705

New Principal Place of Business:

Current Mailing Address:

1601 12TH STREET SOUTH
ST. PETERSBURG, FL 33705

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MUDADA, KIAMBU
1065 16TH AVENUE SOUTH
ST. PETERSBURG, FL 33705 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	MUDADA, KIAMBU PD	
Address:	1065 16TH AVENUE SOUTH	
City-St-Zip:	ST. PETERSBURG, FL 33705	
Title:	VP	( ) Delete
Name:	DAVIS, MARIE VP	
Address:	1537 13TH STREET SOUTH	
City-St-Zip:	ST. PETERSBURG, FL 33705	
Title:	S	( ) Delete
Name:	CROSBY, ALMA S	
Address:	1619 12TH STREET SOUTH	
City-St-Zip:	ST. PETERSBURG, FL 33705	
Title:	T	( ) Delete
Name:	JENKINS, BETTY T	
Address:	1544 13TH STREET SOUTH	
City-St-Zip:	ST. PETERSBURG, FL 33705	
Title:	D	( ) Delete
Name:	GULLIAM, DOROTHY T	
Address:	1527 13TH STREET SOUTH	
City-St-Zip:	ST. PETERSBURG, FL 33705	
Title:	D	( ) Delete
Name:	ROBINSON, LOVETTE TR	
Address:	1300 13TH AVE S	
City-St-Zip:	ST. PETERSBURG, FL 33705	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
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: KIAMBU MUDADA P 04/16/2008

Electronic Signature of Signing Officer or Director — Date