### 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N04000004506

Entity Name: THE STUDIO @ 620, INC.

FILED Oct 24, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business

620 FIRST AVE S ST PETERSBURG, FL 33701

**Current Mailing Address: New Mailing Address:** 

620 FIRST AVE S ST PETERSBURG, FL 33701

FEI Number: 52-2398308 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ELLIS, GEORGE DAVID 620 FÍRST AVE S ST PETERSBURG, FL 33701 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:

Date

#### Electronic Signature of Registered Agent

# ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

#### **OFFICERS AND DIRECTORS:**

(X) Change ( ) Addition () Delete

FELICE, WILLIAM DR. O'DELL, ROBIN Name: Name: 1 BEACH DRIVE SE Address: PO BOX 3472 Address:

City-St-Zip: ST. PETERSBURG, FL 33701 US City-St-Zip: ST. PETERSBURG, FL 33731 US

Title: () Delete Title: (X) Change ( ) Addition

MUTCHLER, SHEILA Name: HENEGER, ERICH Name: Address: 1923 BEAC H DR. SE Address: PO BOX 1284

City-St-Zip: ST. PETERSBURG, FL 33705 US City-St-Zip: ST. PETERSBURG, FL 33731 US

Title: () Delete Title: (X) Change ( ) Addition

CAMPBELL, THOMAS Name: AGAN, RICHARD Name: 6931 STONES THROW CIRCLE 251 DRIFTWOOD ROAD SE Address: Address:

City-St-Zip: SAINT PETERSBURG, FL 33710 City-St-Zip: SAINT PETERSBURG, FL 33705

Title: D ( ) Delete Title: (X) Change ( ) Addition

Name: ELLIS, DAVID G Name: BEAVEN, SUSAN DR 1160 SAN CARLOS AVE NE Address: 1619 BEACH DR SE Address: City-St-Zip: SAINT PETERSBURG, FL 33701 City-St-Zip: SAINT PETERSBURG, FL 33702

Title: () Delete Title: ( ) Change (X) Addition ELLIS, G. DAVID Name: Name:

1619 BEACH DRIVE SE Address: Address: City-St-Zip: City-St-Zip: SAINT PETERSBURG, FL 33701 Title: () Delete Title: ( ) Change (X) Addition

JONES, ROBERT Name: Name:

Address: Address: 1627 BEACH DR SE

SAINT PETERSBURG, FL 33701 City-St-Zip: 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: G. DAVID ELLIS D 10/24/2007