

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

FILED
Mar 10, 2006 8:00 am
Secretary of State

03-10-2006 90007 038 ****61.25

DOCUMENT # N04461

1. Entity Name

NEIGHBORHOOD A HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business

4691 LAUREL OAK LANE NE
ST. PETERSBURG FL 33703
US

Mailing Address

4691 LAUREL OAK LANE N.E.
SUITE C-3
ST. PETERSBURG FL 33703
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2454544

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LYON, KAY E
519 ST TROPEZ CIR NE
ST. PETERSBURG FL 33703

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

Kay E. Lyon *Kay E. Lyon VP*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

3/4/06

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

TITLE TD ☐ Delete
NAME LIPE, DIANE
STREET ADDRESS 531 ST TROPEZ CIR NE
CITY-ST-ZIP SAINT PETERSBURG FL 33703

TITLE VD ☒ Delete
NAME WATTS, JULIE
STREET ADDRESS 553 ST TROPEZ CIR NE
CITY-ST-ZIP SAINT PETERSBURG FL 33703

TITLE PD ☐ Delete
NAME MOORE, MARILYN
STREET ADDRESS 527 ST. TROPEZ CIR NE
CITY-ST-ZIP SAINT PETERSBURG FL 33703

TITLE SP ☐ Delete
NAME RICHARDS, FRANK
STREET ADDRESS 449 ST. TROPEZ CIR NE
CITY-ST-ZIP SAINT PETERSBURG FL 33703

TITLE VP ☐ Delete
NAME LYON, KAY E
STREET ADDRESS 51 ST TROPEZ
CITY-ST-ZIP ST. PETE FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Treasurer ☐ Change ☒ Addition
NAME Thomas W. Morgan
STREET ADDRESS 514 St. Tropez Cir NE
CITY-ST-ZIP St. Petersburg FL 33703

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☒ Addition
NAME
STREET ADDRESS 519 St. Tropez Cir NE
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Kay E. Lyon *Kay E. Lyon*

3/4/06

727 526-6731