2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002630

Jul 07, 2008 Secretary of State

Entity Name: STONEWALL DEMOCRATS OF PINELLAS COUNTY, INC. **Current Principal Place of Business: New Principal Place of Business:** 250 ISLE DRIVE ST PETE BEACH, FL 33706 US **Current Mailing Address: New Mailing Address:** 5319 21ST AVENUE, NORTH SAINT PETERSBURG, FL 33710 US FEI Number: 20-4357869 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JOHNSON, DAVID E CALDWELL, GAIL E 5319 21ST AVENUE, N 11220 4TH STREET EAST ST PETERSBURG, FL 33710 TREASURE ISLAND, FL 33706 US 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: GAIL CALDWELL 07/07/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BOYLAN, RICHARD Q Name: Name: 250 ISLE DRIVE Address: Address: City-St-Zip: ST PETE BEACH, FL 33706 US City-St-Zip: Title: () Delete Title: () Change () Addition MCHUGH, STEVEN Name: Name: Address: 623 3RD STREET NAPT 1 Address: City-St-Zip: ST. PETERSBURG, FL 33701 US City-St-Zip: Title: VΡ (X) Delete Title: () Change () Addition ROWLAND, ROBIN Name: Name: 3601 3RD AVERNUE, N Address: Address: City-St-Zip: ST. PETERSBURG, FL 33713 US City-St-Zip: () Delete (X) Change () Addition Title: SEC Title: TRE CALDWELL, GAIL Name: CALDWELL, GAIL Name: 11220 4TH STREET, EAST Address: 11220 4TH STREET, EAST Address: City-St-Zip: TREASURER ISLAND, FL 33706 US City-St-Zip: TREASURER ISLAND, FL 33706 US Title: () Delete Title: (X) Change () Addition JOHNSON, DAVID E CARP, JOE Name: Name: 5319 21ST AVENUE, N 752 CAPE COD DRIVE Address: Address: VALRICO, FL 33594 US City-St-Zip: ST PETERSBURG, FL 33710 US 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: GAIL CALDWELL **TRE** 07/07/2008