

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N28835

**FILED**  
**Feb 28, 2011**  
**Secretary of State**

**Entity Name:** COUNCIL OF NEIGHBORHOOD ASSOCIATIONS OF SOUTH PINELLAS COUNTY, INC.

**Current Principal Place of Business:**

6215 BAHAMA SHORES DRIVE  
SAINT PETERSBURG, FL 33705

**New Principal Place of Business:**

542 LEWIS BLVD SE  
SAINT PETERSBURG, FL 33705

**Current Mailing Address:**

PO BOX 13693  
SAINT PETERSBURG, FL 33733

**New Mailing Address:**

**FEI Number:** 59-2921651      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

MICHAELS, WILL  
6215 BAHAMA SHORES DRIVE SOUTH  
SAINT PETERSBURG, FL 33705      US

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

GULLEY, MICHAEL  
542 LEWIS BLVD SE  
SAINT PETERSBURG, FL 33705      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: MICHAEL GULLEY

02/28/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GULLEY, MICHAEL  
Address: 542 LEWIS BLVD SE  
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: VP  
Name: CATHY, WILSON  
Address: 1182 24TH AVENUE NORTH  
City-St-Zip: ST PETERSBURG, FL 33704

Title: TD  
Name: GAUSMAN, APRIL GAYLE  
Address: 608 12TH AVENUE NORTH  
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: SD  
Name: WEISNER, CONRAD  
Address: 7228 MT. JUPITER DR.  
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: VP  
Name: BAKER, LILLIAN  
Address: 2527 10TH AVENUE SOUTH  
City-St-Zip: SAINT PETERSBURG, FL 33712

I hereby 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 all other like empowered.

SIGNATURE: APRIL GAYLE GAUSMAN

TD

02/28/2011

Electronic Signature of Signing Officer or Director

Date