

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N43981

1. Entity Name

THE AZALEA HOMES COMMUNITY ASSOCIATION, INC. OF

Principal Place of Business

% STEVE MONTGOMERY  
1225 - 72ND ST N  
ST. PETERSBURG FL 33710  
US

Mailing Address

% STEVE MONTGOMERY  
1225 - 72ND ST N  
ST. PETERSBURG FL 33710  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

STEVE MONTGOMERY  
1225 - 72ND ST N  
ST. PETERSBURG FL 33710

4. FEI Number

59-3115613

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
STEVE MONTGOMERY  
1225 - 72ND ST N  
ST PETERSBURG FL 33710 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DVP  
CAROL CALECA  
7335 - 10TH AVE N  
ST. PETERSBURG FL 33710 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DRS  
ROMIG, JOHN  
1440 74TH ST N  
SAINT PETERSBURG FL 33710 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TRES  
ROMIG, JOHN  
810 74TH ST N  
SAINT PETERSBURG FL 33710 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DVP  
KEENAN, KELLY  
1141 ROBINSON DR. N.  
ST. PETERSBURG FL 33710 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DCS  
KELLY, LINDA  
1441 ROBINSON DR N  
ST. PETERSBURG FL 33710 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TRES  
SMITH, KAREN ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DVP  
MALLETTE, BILL ☒ Change ☐ Addition  
ST. PETERSBURG FL 33710

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DCS  
RISKOWITZ, KEVIN ☒ Change ☐ Addition  
810 74TH ST N  
ST. PETERSBURG FL 33710

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Karen Smith* KARENSMITH

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-18-01 727-343-1737

Date Daytime Phone #



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)

0061946