6/2

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 12, 2001 8:00 am
Secretary of State
06-26-2001 90006 025 ****70.00

DOCUMENT # N95000003428

1. Entity Name

GREATER WOODLAWN NEIGHBORHOOD ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2220-12TH ST. NORTH ST. PETERSBURG FL 33704	2220-12TH ST. NORTH ST. PETERSBURG FL 33704

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1182 24th Ave N.	1182 24th Ave, N
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: St. Petersburg Fl	City & State: St. Petersburg Fl
Zip: 33704 Country:	Zip: 33704 Country:

4. FEI Number 59-3316653 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PALOZZI, MICHAEL 2220-12TH ST., NORTH ST. PETERSBURG FL 33704	Name: Cathy Wilson Street Address (P.O. Box Number is Not Acceptable): 1182 24th Ave, N City: St. Petersburg Fl FL Zip Code: 33704

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: Michael Palozzi Cathryn P. Wilson Cathryn P. Wilson President 6/15/01 7/8/01
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LAIRD, KEITH 1161 23RD AVE NORTH ST. PETERSBURG FL 33704	☒ Delete	President Cathy Wilson (D) 1182 24th Ave, N. St. Petersburg Fl 33704	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD PALOZZI, MIKE 2220-12TH ST., NORTH ST. PETERSBURG FL 33704	☒ Delete	Vice President Tom Calahan (D) 1194 24th Ave, N St. Petersburg FL 33704	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ROBERTS, PEGGY 2617-14TH ST. NORTH ST. PETERSBURG FL 33704	☒ Delete	Secretary/Treasurer Laurie Loelke (D) 2480-18th St. N St. Petersburg Fl 33704	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD SAFKO, LISA 1119-25TH AVE ST. PETERSBURG FL 33704	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD CONLEY, RANDALL 2210 12TH ST., NORTH ST. PETERSBURG 33 33704	☐ Delete	Director only.	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E037 (10/00)

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: Michael Palozzi SECRETARY Cathryn P. Wilson 6/15/01 7/8/01 (727) 823-0863
SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR Date Daytime Phone #

Cathryn P. Wilson

2001 UNIFORM BUSINESS REPORT (UBR)

attachment

DOCUMENT # ~~W95000003428~~

1. Entity Name

~~WILSON REAL ESTATE GROUP, INC.~~

9769

Principal Place of Business	Mailing Address

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1182 24th Av. N.	1182 24th Av. N.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: St. Petersburg, FL	City & State: St. Petersburg, FL
Zip: 33704 Country: USA	Zip: 33704 Country: USA

4. FEI Number: 59-3316653 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
Palozzi, Michael 2220 12th St. N. St. Petersburg, FL 33704	Name: Cathryn P. Wilson Street Address (P.O. Box Number is Not Acceptable): 1182 24th Av. N. City: St. Petersburg FL Zip Code: 33704

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: Cathryn P. Wilson Cathryn P. Wilson, President 7/8/01

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Laird, Keith 1161 23rd Av. N. St. Petersburg, FL 33704	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Cathryn P. Wilson (D) 1182 24th Av. N. St. Petersburg, FL 33704	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Palozzi, Mike 2220 12th St. N. St. Petersburg, FL 33704	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Tom Calahan (D) 1194 24th Av. N. St. Petersburg, FL 33704	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Roberts, Peggy 2617 14th St. N. St. Petersburg, FL 33704	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary/Treasurer Laurie Labelfa (D) 2420 12th St. N. St. Petersburg, FL 33704	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Safko, Lisa 1119 25th Av. N. St. Petersburg, FL 33704	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Conley, Randall 2210 12th St. N. St. Petersburg, FL 33704	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (11/00)

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: Cathryn P. Wilson Cathryn P. Wilson President 7/8/01 (727) 823-0863

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #