


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 16, 2006 08:00 AM
Secretary of State

DOCUMENT # N96000002168 1. Entity Name NORTH KENWOOD NEIGHBORHOOD ASSOCIATION, INC.	
---	---

Principal Place of Business 1330 24TH ST N ST PETERSBURG, FL 33713 US	Mailing Address P O BOX 15723 ST PETERSBURG, FL 33733
---	---

DO NOT WRITE IN THIS SPACE



03102006 No Chg-NP CR2E037 (11/05)

4. FEI Number 59-3355442	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**WHYSONG, PHILLIP
1330 24TH ST N
ST PETERSBURG, FL 33713**

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE _____

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
---	--	--

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHARP, DEBRA 2800 13TH AVE N SAINT PETERSBURG, FL 33713
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHYSONG, JANET 1330 24TH ST. N SAINT PETERSBURG, FL 33713
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CASIMIRO, RAEI 3151 10TH AVE N ST PETERSBURG, FL 33713
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MCKINNEY, JAMES 2800 13 TH AVE N ST PETERSBURG, FL 33713
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BEAULIEU, CONRAD 2926 10TH AVE ST PETERSBURG, FL 33713
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SAYLOR, BECKY 2475 17TH AVE. N SAINT PETERSBURG, FL 33713

**DO NOT WRITE
IN THIS SPACE**

U00000470200
03/28/06-80004-019 70.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Phillip Whysong 3/13/06 727-323-8614
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #