

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 13, 2004 8:00 am**  
**Secretary of State**

04-28-2004 90292 033 \*\*\*\*70.00

**DOCUMENT # N97000001416**

1. Entity Name

THE ALLENDALE ASSOCIATION, INC.



Principal Place of Business

1046 40TH AVENUE NORTH  
ST. PETERSBURG FL 33703

Mailing Address

1046 40TH AVENUE NORTH  
ST. PETERSBURG FL 33703

**66421267**



MOORE CR2E037 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-3504536

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

STEVENS, RALPH E JR  
1046 40TH AVENUE NORTH  
ST. PETERSBURG FL 33703

7. Name and Address of New Registered Agent

Name Stephen N. Thompson

Street Address (P.O. Box Number is Not Acceptable)

4538 15th St. N.

City St. Petersburg

**FL**

Zip Code 33703

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 reinstating)

DATE

5/10/04

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **P** ☒ Delete  
NAME STEVENS, RALPH E JR.  
STREET ADDRESS 1046 40TH AVENUE NORTH  
CITY-ST-ZIP ST. PETERSBURG FL 33703

TITLE **VP** ☐ Delete  
NAME MAGEE, MARCIA  
STREET ADDRESS 1401 43RD AVENUE NORTH  
CITY-ST-ZIP ST. PETERSBURG FL 33703

TITLE **ST** ☐ Delete  
NAME KING, MARY LEE  
STREET ADDRESS 1401 42ND AVENUE NORTH  
CITY-ST-ZIP ST. PETERSBURG FL 33703

TITLE **D** ☐ Delete  
NAME THOMPSON, STEPHEN  
STREET ADDRESS 4538 15TH ST. N  
CITY-ST-ZIP ST. PETERSBURG FL 33703

TITLE **D** ☐ Delete  
NAME WELLS, LISA  
STREET ADDRESS 1311 MONTICELLO BLVD. N  
CITY-ST-ZIP ST. PETERSBURG FL 33703

TITLE **D** ☐ Delete  
NAME WILSEY, GEORGE  
STREET ADDRESS 3950 11TH AVE. N  
CITY-ST-ZIP ST. PETERSBURG FL 33703

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

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

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

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

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 the empowered.

SIGNATURE:

Stephen N. Thompson  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/10/04

(727) 522-8243