## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000005851

FILED Feb 04, 2005 Secretary of State

Entity Name: EUCLID/ST. PAUL'S NEIGHBORHOOD ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1211 16TH AVE. N 1300 14TH ST N

ST PETERSBURG, FL 33704 ST PETERSBURG, FL 33705

Current Mailing Address: New Mailing Address:

1211 16TH AVE. N 1300 14TH ST N

ST PETERSBURG, FL 33704 ST PETERSBURG, FL 33705

FEI Number: 59-3427167 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MURPHY, JOANN FISHER, ERIC S 1211 16TH AVE N. 1300 14TH ST N

ST PETERSBURG, FL 33704 US ST 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: ERIC S. FISHER 02/04/2005

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS: ADDITIONS/CHAN

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD () Delete Title: TD (X) Change () Addition

 Name:
 MURPHY, JOANN
 Name:
 FISHER, ERIC

 Address:
 1211 16TH AVE. N
 Address:
 1300 14TH ST N

City-St-Zip: SAINT PETERSBURG, FL 33704 City-St-Zip: SAINT PETERSBURG, FL 33705

Title: PD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SIMON, RAOUL
 Name:

 Address:
 925 15TH AVE N
 Address:

 City-St-Zip:
 ST PETE, FL 33704
 City-St-Zip:

Title: SD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SHOWERMAN, JENNIFER
 Name:

 Address:
 1111 9TH AVE. NORTH
 Address:

 City-St-Zip:
 SAINT PETERSBURG, FL 33704
 City-St-Zip:

Title: VPD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BURTON, GREG
 Name:

 Address:
 1025 16TH AVE. N
 Address:

 City-St-Zip:
 SAINT PETERSBURG, FL 33704
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: ERIC S. FISHER TD 02/04/2005