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

Apr 16, 2004 8:00 am Secretary of State DOCUMENT # N98000002342 1. Entity Name 04-16-2004 90065 005 ****61.25 THE EUCLID HEIGHTS NEIGHBORHOOD ASSOCIATION, Principal Place of Business Mailing Address P. O. BOX 76101 SAINT PETERSBURG FL 33703 FIRST ALLIANCE CHURCH 5000 10TH ST N. SAINT PETERSBURG FL 33703 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) MOORE City & State City & State 4. FEI Number Applied For 59-3596579 Not Applicable Zip Country 7in Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TOMLINSON, RACHEL Street Address (P.O. Box Number is Not Acceptable) 5531 11TH ST NO SAINT PETERSBURG FL 33703 City 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. 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) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE ■ Addition MOLTERE, SUSAN NAME NAME 5830 13TH ST N STREET ADDRESS STREET ADDRESS SAINT PETERSBURG FL 33703 CITY - ST- ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition TOMLINSON, RACHEL NAME NAME 5531 11TH ST NO STREET ADDRESS STREET ADDRESS SAINT PETERSBURG FL 33703 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete Change ☐ Addition 1.74 BOLVIN, DEAN NAME 1400 57 AVE NORTH STREET ADDRESS STREET ADDRESS SAINT PETERSBURG FL 33703 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ■ Addition STABILE, DELORES Dolores Stabile NAME NAME 1138 52 AVE NO STREET ADDRESS STREET ADDRESS ST PETERSBURG FL 33703 CITY-ST-ZIP CITY-ST-ZIP Vice- President TITLE ☐ Delete TITLE Change ■ Addition FERRARI, MICK P NAME NAME 982 50TH AVENUE NORTH STREET ADDRESS STREET ADDRESS ST PETERSBURG FL 33703 CITY-ST-ZIP CITY-ST-ZIP President John Salazar TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS 5030

12. Thereby 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 attachme

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Rete

Ap R-14-64 127-526-5555 Dayline Phone #

FILED