

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 26, 2002 8:00 am
Secretary of State

03-26-2002 90038 010 ****70.00

DOCUMENT # *N99000000807*

1. Entity Name

Campbell Park Neighborhood Association, Inc.

DO NOT WRITE IN THIS SPACE

80051341

2. Principal Place of Business

1525-16th St. So.

3. Mailing Address

P.O. Box 1008

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

St. Petersburg, Fl.

City & State

St. Petersburg, Fl.

4. FEI Number

59-3547592

Applied For

Not Applicable

Zip

33705

Country

Pinellas

Zip

33731

Country

Pinellas

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Iveta M. Berry

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

1001-10th Ave. So.

City

St. Petersburg

FL

Zip Code

33705

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

Iveta M. Berry

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/28/02

DATE

**FEE IS \$61.25
Initial or Amended UBR**

**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

TITLE	<i>President - P</i>	TITLE	
NAME	<i>Iveta M. Berry</i>	NAME	
STREET ADDRESS	<i>1001-10th Ave. So.</i>	STREET ADDRESS	
CITY - ST - ZIP	<i>St. Petersburg, Fl. 33705</i>	CITY - ST - ZIP	
TITLE	<i>Secretary - S</i>	TITLE	
NAME	<i>Rodney Bennett</i>	NAME	
STREET ADDRESS	<i>658-8 60th Ave. So.</i>	STREET ADDRESS	
CITY - ST - ZIP	<i>St. Petersburg, Fl. 33705</i>	CITY - ST - ZIP	
TITLE	<i>Treasurer - T</i>	TITLE	
NAME	<i>Robert Johnson</i>	NAME	
STREET ADDRESS	<i>951-9th Ave. So.</i>	STREET ADDRESS	
CITY - ST - ZIP	<i>St. Petersburg, Fl. 33705</i>	CITY - ST - ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
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CITY - ST - ZIP		CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Iveta M. Berry

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/02

DATE

Daytime Phone #

CR2E037B (12/01)