## 2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

## DOCUMENT # N99000001777

GARDEN MANOR NEIGHBORHOOD ASSOCIATION, INC.



**FILED** Jan 30, 2008 08:00 AM **Secretary of State** 

Principal Place of Business

P.0 BOX 40682 ST. PETERSBURG, FL 33710 Mailing Address

P.O BOX 40682

ST. PETERSBURG, FL 33710



01212008 No Chg-NP

CR2E037 (4/06)

4. FEI Number NOT APPLICABLE Applied For Not Applicable \$8.75 Additional

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

HEALEY, JOHN 6380 - 17TH PLACE N ST. PETERSBURG, FL 33710

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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 aignature required when reinstating)					DATE		
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financing Trust Fund Contribution.	· 🗆	\$5.00 May Be Added to Fees	, ,		•
10.	OFFICERS AND DIRECTORS					<del> </del>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FEININGER, HAROLD 6348 17TH TERRACE NORTH ST. PETERSBURG, FL 33710			·			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST NELSON, VIRGINIA 6466 18TH AVENUE NORTH ST. PETERSBURG, FL 33710				U0000i 02/05/08	0804930 -80088-0	12 61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILSON, SANDRA 1741 - 65TH WAY N SAINT PETERSBURG, FL 33710		-	<b>DO</b>	NOT W	)RITE	: - *     *
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COP BELL, BRADLEY 1734 65TH STREET NORTH SAINT PETERSBURG, FL 33710			IN	THIS SI	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WERDEN, MICHELLE 1744 65 ST NORTH ST. PETERSBURG, FL 33710						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COP HEALEY, JOHN 6380 17TH PLACE SAINT PETERSBURG, FL 33710						

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.

| 1/2 T/2008 (727) 345 - 8576

H Bell RINTED NAME OF BIGNING OFFICER OR DIRECTOR 1/27/2008 (727) 345-8570