### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 714902** 

Entity Name: TOWN APARTMENTS, INC., NO. 17, A CONDOMINIUM

FILED Feb 19, 2015 Secretary of State CC1133817843

## **Current Principal Place of Business:**

1900 61ST AVE N

ST PETERSBURG, FL 33714

# **Current Mailing Address:**

1900 61ST AVE N

ST PETERSBURG. FL 33714 US

FEI Number: 59-2875625 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

LEOPOLD, ALICE PRES 1900 59TH AVE NORTH #306

ST.PETERSBURG, FL 33714 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:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title D Title

Name LOUGHNANE, EVELYN Name MILLER, JOAN

Address 1900 59 AVE N #119 Address 1900 59 AVE NORTH SUITE 101
City-State-Zip: SAINT PETERSBURG FL 33714 City-State-Zip: SAINT PETERSBURG FL 33714

STD

Title D Title D/VP

Name NINEDORF, JAMES Name KNEIB, THOMAS J
Address 1900 59TH AVE N #301 Address 1900-59TH AVE N #316

City-State-Zip: SAINT PETERSBURG FL 33714 City-State-Zip: SAINT PETERSBURG FL 33714

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TitleDTitlePRESIDENT/DIRNameROUSSEAU, BARBARANameLEOPOLD, ALICE J

Address 1900 59 AVE #207 Address 1900 59TH AVE NO #306

City-State-Zip: SAINT PETERSBURG FL 33714 City-State-Zip: ST PETERSBURG FL

Title D

Name PETRO, PATRICIA

Address 1900 59TH AVE NO #214 City-State-Zip: ST PETERSBURG FL 33714

I hereby 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 all other like empowered.

SIGNATURE: ALICE LEOPOLD

Electronic Signature of Signing Officer/Director Detail

**PRES** 

02/19/2015 Date