7839 38TH PL N ST. PETERSBU	IO RG, FL 33709 US			
The above named	entity submits this statement for the purpose of changing its regis	tered office or regis	tered agent, or both, in the State of Fle	
SIGNATURE	CAROL LEVY			
	Electronic Signature of Registered Agent			
Officer/Director Detail :				
Title	VP	Title	PRESIDENT, TREASURER	
Name	STASZEWSKI, BARBARA	Name	SLABY, HAROLD	
Address	7839 38 PLACE NO.	Address	7839 38 PLACE NO.	
City-State-Zip:	ST PETERSBURG FL 33709	City-State-Zip:	ST PETERSBURG FL 33709	
Title	DIRECTOR	Title	TREASURER	

10033 DR. MARTIN LUTHER KING ST N 300 SAINT PETERSBURG, FL 33716 US

## FEI Number: 59-3513012

**Current Mailing Address:** 

7839 38 PLACE NO.

## Name and Address of Current Registered Agent:

SCHLAMP, CLAUDIA

7839 38 PLACE NO.

PRESIDENT MOORE, GARY T

7839 38TH PL

ST PETERSBURG FL 33709

ST. PETERSBURG FL 33709

TYRONE VILLAS 7839 38TH PL NO ST. F

Name

Title

Name Address

Address

City-State-Zip:

City-State-Zip:

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: GARY MOORE	PRES	04/29/2021

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Name

Address

City-State-Zip:

BERRY, BRUCE

7839 38TH PL

ST. PETERSBURG FL 33709

## ST PETERSBURG, FL 33709

Entity Name: TYRONE VILLAS, INC., NO. 5

## 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT **DOCUMENT# 718306**

**Current Principal Place of Business:** 

04/29/2021 Date

Date