2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 19, 2020
Secretary of State
1838126066CC

DOCUMENT# 722520

Entity Name: GARDENS OF BEACON SQUARE NUMBER FOUR, INCORPORATED

Current Principal Place of Business:

7300 PARK STREET
SEMINOLE, FL 33777

Current Mailing Address:

7300 PARK STREET
SEMINOLE, FL 33777

FEI Number: 59-1634512

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CIANFRONE, NIKOLOFF, GRANT & GREENBERG
1964 BAYSHORE BLVD
SUITE A
DUNEDIN, FL 34698 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: JOSEPH CIAFRONE 05/19/2020

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	TREASURER
Name	PERKEY, VICKIE
Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777

Title	DIRECTOR
Name	WEBER, GEORGE
Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777

Title	SECRETARY
Name	BAKER, LISA
Address	7300 PARK STREET
City-State-Zip:	CLEARWATER FL 33777

Title	PRESIDENT
Name	CULOTTA, JOHN
Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777

Title	DIRECTOR
Name	LAKE -THOMPSON, ROSEMARIE
Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777

Title	DIRECTOR
Name	JAMISON, JACK
Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777

Title	DIRECTOR
Name	GARRETT, MARLENE
Address	7300 PARK STREET
City-State-Zip:	CLEARWATER FL 33777

Title	VP
Name	KING, DARRYL
Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777

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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: JOHN CULOTTA PRESIDENT 05/19/2020

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	FASCIANO, DENNIS
Address	7300 PARK STREET
City-State-Zip:	SEMINOLE FL 33777