2025 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 722520

Entity Name: GARDENS OF BEACON SQUARE NUMBER FOUR,

INCORPORATED

Current Principal Place of Business:

C/O CONDOMINIUM ASSOCIATES 570 CARILLON PARKWAY SUITE 210 ST. PETERSBURG, FL 33716

Current Mailing Address:

C/O CONDOMINIUM ASSOCIATES 570 CARILLON PARKWAY SUITE 210 ST. PETERSBURG, FL 33716 US

FEI Number: 59-1634512 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

DAN GREENBERG 1964 BAYSHORE BLVD. 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: HANK WONDERS 10/14/2025

Electronic Signature of Registered Agent

Date

FILED

Oct 14, 2025

Secretary of State 8517263134CC

Officer/Director Detail:

Title PRESIDENT Title DIRECTOR WONDERS, HARRY WILLIAM JR. Name Name KERR, NANCY

C/O CONDOMINIUM ASSOCIATES C/O CONDOMINIUM ASSOCIATES Address Address

570 CARILLON PARKWAY SUITE 210 570 CARILLON PARKWAY SUITE 210

ST. PETERSBURG FL 33716 City-State-Zip: ST. PETERSBURG FL 33716 City-State-Zip:

Title DIRECTOR Title **TREASURER**

Name KING, DARYLL Name LAKE-THOMPSON, ROSEMARIE

Address C/O CONDOMINIUM ASSOCIATES Address C/O CONDOMINIUM ASSOCIATES 570 CARILLON PARKWAY SUITE 210 570 CARILLON PARKWAY SUITE 210

City-State-Zip: ST. PETERSBURG FL 33716 City-State-Zip: ST. PETERSBURG FL 33716

Title DIRECTOR Title SECRETARY

ARNEY, CALLIE E Name HARTLEY, MICHAEL J Name

C/O CONDOMINIUM ASSOCIATES C/O CONDOMINIUM ASSOCIATES Address Address

570 CARILLON PARKWAY SUITE 210 570 CARILLON PARKWAY SUITE 210

ST. PETERSBURG FL 33716 ST. PETERSBURG FL 33716 City-State-Zip: City-State-Zip:

DIRECTOR Title DIRECTOR Title

WHITMAN, DAVID L GREEN, IRWIN E Name Name

Address C/O CONDOMINIUM ASSOCIATES Address C/O CONDOMINIUM ASSOCIATES 570 CARILLON PARKWAY SUITE 210

570 CARILLON PARKWAY SUITE 210

ST. PETERSBURG FL 33716 ST. PETERSBURG FL 33716 City-State-Zip: City-State-Zip:

Continues on page 2

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: HARRY WILLIAM WONDERS, JR **PRESIDENT** 10/14/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name MONAHAN, MARK

Address C/O CONDOMINIUM ASSOCIATES

570 CARILLON PARKWAY SUITE 210

City-State-Zip: ST. PETERSBURG FL 33716