

**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

05/27/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name WONDERS, HANK
Address C/O CONDOMINIUM ASSOCIATES
 570 CARILLON PARKWAY SUITE 210
City-State-Zip: ST. PETERSBURG FL 33716

Title DIRECTOR
Name KERR, NANCY
Address C/O CONDOMINIUM ASSOCIATES
 570 CARILLON PARKWAY SUITE 210
City-State-Zip: ST. PETERSBURG FL 33716

Title SECRETARY
Name BAKER, LISA
Address C/O CONDOMINIUM ASSOCIATES
 570 CARILLON PARKWAY SUITE 210
City-State-Zip: ST. PETERSBURG FL 33716

Title TREASURER
Name LAKE-THOMPSON, ROSEMARIE
Address C/O CONDOMINIUM ASSOCIATES
 570 CARILLON PARKWAY SUITE 210
City-State-Zip: ST. PETERSBURG FL 33716

Title DIRECTOR
Name JAMISON, JACK
Address C/O CONDOMINIUM ASSOCIATES
 570 CARILLON PARKWAY SUITE 210
City-State-Zip: ST. PETERSBURG FL 33716

Title DIRECTOR
Name HARTLEY, MICHAEL
Address C/O CONDOMINIUM ASSOCIATES
 570 CARILLON PARKWAY SUITE 210
City-State-Zip: ST. PETERSBURG FL 33716

Title DIRECTOR
Name ARNEY, CALLIE
Address C/O CONDOMINIUM ASSOCIATES
 570 CARILLON PARKWAY SUITE 210
City-State-Zip: ST. PETERSBURG FL 33716

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: HANK WONDERS

PRESIDENT

05/27/2025

Electronic Signature of Signing Officer/Director Detail

Date