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 06/10/2025

Electronic Signature of Registered Agent

Officer/Director Detail:

Title PRESIDENT Title DIRECTOR

Name WONDERS, HANK Name KERR, NANCY

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 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

Name HARTLEY, MICHAEL Name ARNEY, CALLIE

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

Name WHITMAN, DAVID L

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 06/10/2025

Electronic Signature of Signing Officer/Director Detail

Date

Date

FILED

Jun 10, 2025

Secretary of State 6857603476CC