2025 FLORIDA NOT FOR PROFIT CORPORATION 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 01/23/2025

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

PRESIDENT Title Title DIRECTOR Name WONDERS, HANK Name KERR, NANCY

C/O CONDOMINIUM ASSOCIATES Address 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 SECRETARY Title TREASURER

BAKER, LISA Name LAKE-THOMPSON, ROSEMARIE 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:

Title DIRECTOR Title VP

Name JAMISON, JACK Name HALL, MARY

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 DIRECTOR HARTLEY, MICHAEL Name ARNEY, CALLIE 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:

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** 01/23/2025

FILED Jan 23, 2025

Secretary of State

3913944707CC