2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 724688

Entity Name: FIVE TOWNS OF ST. PETERSBURG, NO. 301, INC.

FILED Mar 17, 2016 **Secretary of State** CC6719512219

Current Principal Place of Business:

5660 80TH ST NORTH

SAINT PETERSBURG, FL 33709

Current Mailing Address:

8141 54TH AVE N

SAINT PETERSBURG, FL 33709 US

FEI Number: 59-1534987 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VESTA PROPERTY SERVICES, INC. 8141 54TH AVE N SAINT PETERSBURG, FL 33709 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: PETER K. SCHMIDT 03/17/2016

Electronic Signature of Registered Agent

Officer/Director Detail:

Title **SECRETARY** Title **PRESIDENT** JACOB, PATRICIA Name Name ESSLER, VESTA Address 5660 80TH ST N Address 5660 80TH ST N

C-208

D-104

A-207

5660 80TH ST N

City-State-Zip: SAINT PETERSBURG FL 33709 City-State-Zip: SAINT PETERSBURG FL 33709

Title DIRECTOR Title DIRECTOR

Name BALLABON, NICHOLAS Name KHANO, ROBERTA 5660 80TH ST N Address

5660 80TH ST N Address B-303

SAINT PETERSBURG FL 33709

A-307

City-State-Zip: SAINT PETERSBURG FL 33709

Address

Title **DIRECTOR** Title **TREASURER**

Name WALLENHURST, KURT Name PROCTOR, ANETTE

Address 5660 80TH ST N

A-105

City-State-Zip: SAINT PETERSBURG FL 33709 City-State-Zip: SAINT PETERSBURG FL 33709

Title VΡ

City-State-Zip:

PELLETIER, RONALD Name Address 5660 80TH ST N

B-308

SAINT PETERSBURG FL 33709 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.

03/17/2016 SIGNATURE: VESTA ESSLER **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date

Date