

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764794

Entity Name: THE CIVITAN CLUB OF ST. PETERSBURG, INC.**Current Principal Place of Business:**18602 GULF BLVD
INDIAN SHORES, FL 33785**Current Mailing Address:**PO BOX 3064
SEMINOLE, FL 33775-3064 US**FEI Number: 59-6134180****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**PANOS, THOMAS MR
700 CENTRAL AVE
#205B
SAINT PETERSBURG, FL 33701 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	SECRETARY/TREASURER
Name	HECKERT, LAUREN
Address	13032 FOREST DR.
City-State-Zip:	SEMINOLE FL 33776

Title	DIRECTOR
Name	STARKWEATHER, THOMAS
Address	14290 PASSAGE WAY
City-State-Zip:	SEMINOLE FL 33776

Title	PRESIDENT
Name	RODRIQUEZ, MAGDA
Address	12050 PARK BLVD APT. 292
City-State-Zip:	SEMINOLE FL 33772

Title	DIRECTOR
Name	BUNGARD, NORMAN
Address	5400 PARK ST N. # PH7
City-State-Zip:	SAINT PETERSBURG FL 33709

Title	PAST PRESIDENT
Name	BELCHER, JIM
Address	4028 AUDUBON DR
City-State-Zip:	LARGO FL 33771

Title	PRESIDENT ELECT
Name	HECKERT, TERASA
Address	13032 FOREST DR
City-State-Zip:	SEMINOLE FL 33776

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: LAUREN HECKERT**SECRETARY/TREASURER 02/25/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date