

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764794

Entity Name: THE CIVITAN CLUB OF ST. PETERSBURG, INC.**Current Principal Place of Business:**736 17TH AVE NE
ST PETERSBURG, FL 33704**Current Mailing Address:**736 17TH AVE NE
ST. PETERSBURG, FL 33704 US**FEI Number: 59-6134180****Certificate of Status Desired: Yes****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	TREASURER
Name	SCHROEDER, ROBERT
Address	2614 53RD ST S
City-State-Zip:	ST PETERSBURG FL 33707

Title	S
Name	GEIER, JUDY
Address	9939 34TH WAY
City-State-Zip:	PINELLAS PARK FL 33782

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

Title	D
Name	BRIDGE, ANN
Address	1075 31ST TERR NE
City-State-Zip:	LARGO FL 33704

Title	PRESIDENT
Name	ROSE, GREGG
Address	2100 NURSERY RD #J-1
City-State-Zip:	CLEARWATER FL 33764

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: ROBERT SCHROEDER**TREASURER****01/17/2016**_____
Electronic Signature of Signing Officer/Director Detail_____
Date