

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04461

Entity Name: NEIGHBORHOOD A HOMEOWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**4691 LAUREL OAK LANE NE
ST. PETERSBURG, FL 33703**Current Mailing Address:**4691 LAUREL OAK LANE NE
ST. PETERSBURG, FL 33703 US**FEI Number: 59-2454544****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LYON, KAY E
519 ST TROPEZ CIR NE
ST. PETERSBURG, FL 33703 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	TD
Name	LIPE, DIANE
Address	531 ST TROPEZ CIR NE
City-State-Zip:	SAINT PETERSBURG FL 33703

Title	PD
Name	MOORE, MARILYN
Address	527 ST. TROPEZ CIR NE
City-State-Zip:	SAINT PETERSBURG FL 33703

Title	VP
Name	LYON, KAY E
Address	519 ST. TROPEZ CIRCLE N.E.
City-State-Zip:	SAINT PETERSBURG FL 33703

Title	T
Name	MORGAN, THOMAS W
Address	514 ST. TROPEZ CIRCLE N.E
City-State-Zip:	SAINT PETERSBURG FL 33703

Title	SP
Name	CHERYL, MALLORY
Address	503 ST. TROPEZ CIR NE
City-State-Zip:	SAINT PETERSBURG FL 33703

Title	AVP
Name	LIND, DIANA
Address	542 ST. TROPEZ CIRCLE N>E>
City-State-Zip:	SAINT PETERSBURG FL 33703

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: KAY E. LYON**VICE PRESIDENT****02/08/2013**

Electronic Signature of Signing Officer/Director Detail

Date