2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000001140

Entity Name: ROTARY CLUB OF ST. PETERSBURG, INC

FILED Feb 06, 2019 **Secretary of State** 2749584725CC

Current Principal Place of Business:

6949 13TH AVENUE N ST PETERSBURG, FL 33710

Current Mailing Address:

P. O. BOX 40052

ST PETERSBURG, FL 33743-0052 US

FEI Number: 59-0428468 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THOMPSON, JAMES BJR. 150 2ND AVENUE N **SUITE 1500**

ST. 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** Title **TREASURER**

Name THOMAS, BOND Name VANMIDDLESWORTH-BANKS, JILL

Address 1210 16TH STREET N Address 678 4TH STREET N

ST PETERSBURG FL 33701 City-State-Zip: City-State-Zip: ST. PETERSBURG FL 33705

Title **PRESIDENT** Title SERGEANT AT ARMS

Name CARTER, ROBERT Name ARNOLD, CHRIS Address 146 2ND AVENUE N Address 624 QUINTANA PLACE NE

ST PETERSBURG FL 33701 City-State-Zip: ST PETERSBURG FL 33703 City-State-Zip:

Title DIRECTOR Title

HEARN, JEFFREY Name Name WILLINGHAM, TROY

Address 104 MARON STREET NE Address 753 BRIGHTWATERS BLVD NE ST. PETERSBURG FL 33704

City-State-Zip: City-State-Zip: ST. PETERSBURG FL 33704

Title PRESIDENT ELECT Title **DIRECTOR**

Name HEINKEL, ELIZABETH Name SHORTER, MICHAEL D. JR.

Address C/O COASTAL PROPERTIES GROUP Address 870 64TH AVENUE S 238 BEACH DRIVE NE

City-State-Zip: ST. PETERSBURG FL 33705 City-State-Zip: ST. PETERSBURG FL 33701

Continues on page 2

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.

02/06/2019 SIGNATURE: BOND THOMAS **SECRETARY**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name OZBOLT, JOSEPH

Address 1619 WATERMARK CIRCLE NE

City-State-Zip: ST. PETERSBURG FL 33702

Title DIRECTOR

Name PHARES, DOUG

Address 426 19TH AVENUE N

City-State-Zip: ST. PETERSBURG FL 33704

Title DIRECTOR

Name SZEMATOWICZ, BRETT Address 188 69TH AVENUE N

City-State-Zip: ST. PETERSBURG FL 33702

Title DIRECTOR

Name RUSSELL, SCOTT

Address P. O. BOX 40052

City-State-Zip: ST. PETERSBURG FL 33743

Title DIRECTOR

Name CLARK, BRIAN

Address 621 24TH STREET N

City-State-Zip: ST. PETERSBURG FL 33713