

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000010555

**Entity Name:** ST. PETE ACRO YOGA, INC

**Current Principal Place of Business:**

1208 21ST AVE W  
PALMETTO, FL 34221

**Current Mailing Address:**

1208 21ST AVE W  
PALMETTO, FL 34221

**FEI Number:** 87-2522219

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MAURO, JOSHUA M  
1208 21ST AVE W  
PALMETTO, FL 34221 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 P  
Name MAURO, JOSHUA M  
Address 1208 21ST AVE W  
City-State-Zip: PALMETTO FL 34221

Title VP  
Name MEKA, TAULBEE A  
Address 1171 BLUFFS CIRCLE  
City-State-Zip: DUNEDIN FL 34698

Title SEC  
Name HART, TORI  
Address 3934 10TH AVE N UPPR  
City-State-Zip: ST.PETERSBURG FL 33713

Title ASST. SECRETARY  
Name SNYDER, ROB  
Address 4820 15TH AVENUE NORTH  
City-State-Zip: ST. PETERSBURG FL 33713

Title ASST. SECRETARY  
Name YONKE, ERIN  
Address 602 8TH AVE N  
City-State-Zip: ST PETERSBURG FL 33701

Title SECRETARY  
Name COX, AARON  
Address 518 GARLAND ST. N  
City-State-Zip: ST.PETERSBURG FL 33703

Title SECRETARY  
Name BACHNER, CRAIG  
Address 5902 SKIMMER POINT BLVD S  
City-State-Zip: GULFPORT FL 33707

*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:** MEKA A TAULBEE

VP

03/26/2024

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date