

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

DOCUMENT# N94000000876

**Entity Name:** PASADENA CARD CLUB, INC.

**Current Principal Place of Business:**

10 PARK ST N  
ST PETERSBURG, FL 33710

**Current Mailing Address:**

10 PARK ST N  
ST PETERSBURG, FL 33710

**FEI Number: 59-0827278**

**Certificate of Status Desired: No**

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

LAVELLE ADAMS, ROBBIE  
10 PARK ST N  
SAINT PETERSBURG  
SAINT PETERSBURG, FL 33710 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: ROBBIE LAVELLE ADAMS**

**01/08/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name THOMAS, PAUL  
Address 10 PARK ST N  
City-State-Zip: ST PETERSBURG FL 33710

Title DIRECTOR  
Name SHIELDS, SANDRA  
Address 10 PARK ST N  
City-State-Zip: ST PETERSBURG FL 33710

Title TREASURER  
Name LAVELLE ADAMS, ROBBIE  
Address 10 PARK ST NORTH  
City-State-Zip: ST. PERERSBURG FL 33710

Title SECRETARY  
Name BISHOP, BILL  
Address 10 PARK ST N  
City-State-Zip: ST PETERSBURG FL 33710

Title VP  
Name SATTERFFIELD, CARLA  
Address 10 PARK ST N  
City-State-Zip: ST PETERSBURG FL 33710

*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: ROBBIE LAVELLE**

**SECRETARY**

**01/08/2024**

Electronic Signature of Signing Officer/Director Detail

Date