

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 254170

Entity Name: BRIGHTWATERS TOWER OF SNELL ISLE INC**Current Principal Place of Business:**10033 DR. MARTIN LUTHER KING ST N
300
SAINT PETERSBURG, FL 33716**Current Mailing Address:**10033 DR. MARTIN LUTHER KING ST N
300
SAINT PETERSBURG, FL 33716 US**FEI Number:** 59-0948504**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PBM
10033 DR. MARTIN LUTHER KING ST N
300
SAINT PETERSBURG, FL 33716 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:** BLAIR NEWTON

04/24/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR
Name	BURNS, STEVE
Address	10033 DR. MARTIN LUTHER KING ST N 300
City-State-Zip:	SAINT PETERSBURG FL 33716

Title	TREASURER
Name	MILLER, MARYETTE
Address	10033 DR. MARTIN LUTHER KING ST N 300
City-State-Zip:	SAINT PETERSBURG FL 33716

Title	PRESIDENT
Name	LEAVINE, ANN
Address	10033 DR. MARTIN LUTHER KING ST N 300
City-State-Zip:	SAINT PETERSBURG FL 33716

Title	DIRECTOR
Name	TALBOT, RACHEL
Address	10033 DR. MARTIN LUTHER KING ST N 300
City-State-Zip:	SAINT PETERSBURG FL 33716

Title	SECRETARY
Name	TESSMAN, DEIRDRE
Address	10033 DR. MARTIN LUTHER KING ST N 300
City-State-Zip:	SAINT PETERSBURG FL 33716

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANN LEAVINE

PRES

04/24/2020

Electronic Signature of Signing Officer/Director Detail

Date