City of St. Petersburg

City Council
Co-Sponsored Events Committee

Thursday, November 29, 2018, 2:30PM

City Hall Room 100

Committee Members
Lisa Wheeler-Bowman
Charlie Gerdes
Brandi Gabbard
Ed Montanari
Steve Kornell (Alternate)

Agenda

I. Call to Order

II. Approval of seventeen (17) events for FY 19
   a. waiving the non-profit requirement for five (5) events

III. Approval of two (2) events for FY 20

IV. Public Comment

V. Adjournment

1	Movies in the Park (May)
2	Running For All Children
3	SPC/USFSP Art & Music festival
4	Special Olympics Area Games
5	St. Pete Veg Fest
6	Good With Me Day Festival
7	St Pete Pride Weekend
8	Historic Kenwood Pinot in the Park
9	Heroes Memorial 5K/10K Run
10	2nd Saturday Jazz in the Park
11	Tampa Bay Music festival
12	Community Festival & Ftiness Walk
13	The Downtown 20K Relay Race
14	Painting in the Park 2019
15	St. Pete Beer & Brunch Festival
16	Tampa Bay Caribbean Carnival
17	Extreme Mudwars
18	Out of the Darkness - FY20
19	Florida Orchestra in the Park FY2-
20	
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AVERY

CITY OF ST. PETERSBURG
PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENT APPLICATION

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www.stpete.org

st. petersburg parks & recreation

Date Received: 9/12/18
Check or Cash:
Application #:
Packet: C
Permit #: 24885

Event Title: May Movies in the Park Phone No.: 727 824-7802 Fax No.:

Entity Name: St. Petersburg Preservation, Inc. d/b/a Preserve the 'Burg Federal I.D. Number: 59-1898534

Event Date(s): May 2, 9, 16, 23, 30, 2019 Location: April 27 at Adm. Farragut; May dates at N. Straub Park

Day 1 of Event: same each date Time Gates Open: 6:30 pm Ending Time: 10:15 pm

Day 2 of Event: Time Gates Open: Ending Time:

Day 3 of Event: Time Gates Open: Ending Time:

Application Prepared by: Peter Belmont Phone: 717 463-4612

Title: Vice President Cell Phone: same

Address: 102 Fareham Pl. N. City: St. Petersburg State: FL Zip: 33701

Email Address: info@preservetheburg.org

Additional Contact Person: donna miller Day Phone: 717 525-0770

What month/year were you incorporated as nonprofit? 1977

List all 501(c)3 entities that will benefit from this event. St. Petersburg Preservation & Jump For Kids (beer/wine sales)

Name of the for-profit entity? none

Describe how this event will contribute to the quality of life in and enhance the image of St. Petersburg.

May 2019 will be the 10th year for the event and we believe it has become one of the favorite downtown waterfront park events. It is the type of event that people point to for why living in St Pete is special. Our event space is typically full each movie night and people consistently ask us to offer Movies in the Park more often. As reflected in questionnaire answers, people love the atmosphere of the event and its waterfront location. Attendees to the event spend money downtown and money to purchase picnic supplies from local stores or from event vendors. In short, Movies in the Park is an event loved and enjoyed by many and one of the small economic generators for downtown that cumulatively, with other events, adds up to a successful downtown.

Describe what economic benefit and impact this event will bring to St. Petersburg.

Most people attending Movies in the Park are either spending money at local businesses purchasing supplies for a picnic at the event, spending money purchasing food from vendors at the event, or spending money at nearby downtown businesses before and after the event. We have limited survey information documenting spending by some Movie in the Park attendees.

Each co-sponsored entity must possess liability insurance naming the City of St. Petersburg as an additional insured and secure said insurance in the amount determined by the City.

Does your group presently have liability insurance? ☑ YES ☐ NO How much? 1 million

Are there plans to sell or distribute beer/wine at your event? ☑ YES ☐ NO

Will there be an admission / registration fee? ☐ YES ☑ NO Advanced Fee: Day of:

Please provide the website address for your event. www.preservetheburg.org

Please provide a phone number that can be advertised to the public. 727 463-4612

What is the estimated attendance for this event? *Spectators* 700 *Participants* *Last Year's Total Attendance* 3000

Please check the equipment and/or facilities you are requesting.

Recreation Equipment

Showmobile (Yes/No) no

Bleacher(s) needed. Each bleacher approx. 180 people)

Tables (6 ft) # needed 8 Chairs # needed 50

Public Address System yes

# of portable risers needed (4 in. x 8 in. x 16 in. sections) 2

Special Events Facilities

- ☐ Mahaffey Theater
- ☐ Coliseum
- ☐ Sunken Gardens
- ☐ Boyd Hill

☐ Non-City Locations

Which Location?

The following departments may provide and charge for additional services. You will be provided cost estimates in your Co-sponsored Agreement.

POLICE:	Public Safety Personnel, Marine Services
TRAFFIC:	Personnel, Equipment (cones, barricades, no parking signs)
FIRE:	Paramedics, Inspectors
PARKS SERVICES:	Cleanup Personnel, Dumpster(s), Trash Receptacles, Event Site Preparation and Restoration
RECREATION SERVICES:	On-site Presence, Logistics Help, Liaison with Other Ddepartments

Note: The City does not provide tents, Port-O-Lets, or large quantities of tables and chairs.

I certify that the event will be open to all citizens and that individuals will not be barred from participation due to race, creed, color, national origin, sex, age, or physical impairment. I understand that a financial report of the event is due in the Parks and Recreation office within 30 days of the completion of the event. I also understand that the City is to be shown as a co-sponsor on any promotional materials produced for the event. I agree to obtain the required liability insurance and to secure all necessary city/county/state permits/licenses. I further certify that the facts contained in this application are accurate.

Name:	Peter Belmont	Title:	Vice President	Date:	9/11/18
Co-Sign:		Title:		Date:	

NOTE:

a. **If person/entity preparing this application is not representing a nonprofit entity, the application must be co-signed by someone from a sponsoring nonprofit entity. A copy of the sponsoring entity's 501(c)3 designation must accompany this application.**

b. **If your entity has outstanding financial obligations with any department within the City of St. Petersburg, your application will not be processed until debt if paid.**

c. **Applications lacking information or the required completed appendixes listed below will not be processed.**

PLEASE ATTACH THE FOLLOWING

1. Route map for parade, run, walk, and/or bike event.
2. Site map of event and detail schedule of each day's events including open and close times.
3. Complete Appendix B and Appendix C.
4. Check for $30.00 for co-sponsored application processing (non-refundable).
5. Check for park permit fee. See Appendix A for fee structure.
6. A copy of 501(c)3 designation (if applicable)

FOR FURTHER INFORMATION, PLEASE CALL LYNN GORDON, PARKS & RECREATION MANAGER, 727-893-7766 or EMAIL: StPeteEvents@stpete.org

st.petersburg
www.stpete.org

PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENTS
SUMMARY SHEET

st. petersburg parks & recreation

Review and check all conditions which apply to this event: Note the corresponding obligation for each condition.

Condition		Obligation
☑ Public Invited		General Liability Insurance
☑ Located in Park		Park Permit
☑ Vending Product / Merchandise Sales		Occupational License
☑ Vending Food / Beverage		Health Inspection
☑ Vendors / Exhibitors	How many? 1 - 10 Vendors / Exhibitors	
☑ Vending Beer / Wine		Alcohol Permit Additional Insurance Required
☐ Erecting Tents - Larger than 10ft x 12ft	How many?	Temporary Structure Permit
☐ Fence Installation	What type?	Temporary Structure Permit
☐ Other Structures	What structure?	Temporary Structure Permit
☐ Open Flame Food Preparation		Fire Inspection Permit
☐ Pyrotechnics		Fireworks Permit
☐ Require Street Closure		Parade or Street Closure Permit(s)
☐ VIP Area		
☑ Staging	☐ Professional ☐ Showmobile ☑ Other	
☑ Amplified Sound	☑ Performers ☐ Announcement Only	
☑ Security	☐ Daytime - Private ☐ Overnight - Private ☑ Event Time Frame - SPPD	
☑ Sanitary Facilities - Port-O-Lets	Regular Units 3 Disabled Units 1 Hand Washing 2	
☐ Off-site Parking / Shuttle		
☐ Semitruck / Tractor Trailer		

Marketing: Please check all that apply.

☐ Invitations
☑ Posters / Flyers
☑ Newspaper / Internet
☐ Radio
☐ Television
☐ Remote Broadcast

City logo should be used in any promotional materials, posters, flyers, ads, website, public service announcements, and press releases.

Electrical Requirements:

Does your event require any power needs using more than the standard 110/20amp located in the parks? ☐ YES ☑ NO

If YES, check all that apply. ☐ RV'S ☐ Coffee Vendors ☐ Ice Bins ☐ Freezers ☐ Ice Cream Vendors ☐ Catering Trucks

☐ Other:

Please explain the details of the above items checked. Tell us how much and what type of power they would require.

Will you supply your own generators? ☐ YES ☐ NO

Will your event have a licensed electrician on-site during the event? ☐ YES ☐ NO If YES, who?

Will your event be requesting any variances from City policies or procedures? If YES, please explain.

no

If City permits, licenses, or services are required for event, who will pay for them?

Name: St. Petersburg Preservation d/b/a Preserve the 'Burg Phone: 727 824-7802

Address (including zip): P.O. Box 838, St. Petersburg, FL 33731

Type of music, # of stages, and # of bands.

As in past years, type of music will vary each movie evening. Each movie evening includes an hour of live music before the start of the movie with a solo or small group of musicians at one small stage (risers) area.

List Vending Products, Name & Provider.

Several food vendors will be on-site. Vendors in the past have included kettle korn, popsicles, cookies/desert food, veggie burgers & smoothies, turkey legs. Jump 4 Kids will sell beer/wine. St. Petersburg Preservation d/b/a Preserve the 'Burg will have a booth with information and books, tee-shirts and posters for sale.

For Use of Beer/Wine - Please provide name, address and phone number of the sponsoring 501(c)3 or catering company.

Jump For Kids, Inc.
850 21st Ave. N.
St. Petersburg, FL 33704 727 504-3422

Explain subject/purpose of all speeches/demonstrations which will occur.

n/a

Discuss your load in/load out parking needs, include times and dates.

Set-up occurs approximately 1-2 hours before start of each movie evening and take down occurs immediately after event and is usually complete within 45 minutes of the end of the movie. Kettle Korn and Mr. I Got 'Im have equipment that needs to be driven into park. Parking spaces along Bayshore Dr. are used for a number musicians, staff and some vendors.

Other Comments: Please describe your fee structure.

Event is free. A request for donations is made each movie evening.

Other comments:

I represent and warrant that the purpose of the proposed activity/event and conduct of the sponsor(s) and the participants shall conform to all requirements of law and all ordinances of the State of Florida, Pinellas County, and the City of St. Petersburg including, but not limited to, City noise ordinances and Parks and Recreation Department Policies and Procedures. I acknowledge that failure to observe such laws, ordinances, or policies and procedures will result in an immediate cancellation of the event and all permits.

WITHOUT LIMITING THE GENERALITY OF THE FOREGOING, I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE PARKS AND RECREATION DEPARTMENT POLICIES AND PROCEDURES PERTAINING TO THE USE OF PARKS AND THE PARK RULES SET FORTH IN ARTICLE II, CHAPTER 21, OF THE ST. PETERSBURG CITY CODE, INCLUDING BUT NOT LIMITED TO THE INDEMNIFICATION AND INSPECTION OBLIGATIONS ASSUMED BY ME AND THE PERSON OR ENTITY ON WHOSE BEHALF THIS APPLICATION IS BEING MADE.

I certify that the facts contained in this application are accurate.

Name: Peter Belmont Title: Vice-President Date: 9-11-18

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Appendix B
President or CEO
Responsible Party Information

Please complete the information below for each responsible party.

Name of the **Nonprofit** Corporation: Saint Petersburg Preservation, Inc. d/b/a Preserve the 'Burg

Name of Responsible Party (President or CEO ONLY): Emily Elwyn

Title of Responsible Party: President

Physical Address of Responsible Party: 836 16th Ave. NE, St. Petersburg, FL 33701

Phone Number of Responsible Party: 727 515-4509

Email Address of Responsible Party: eelwyn@me.com

Nonprofit (Employee Identification Number): 59-1898534

Name of the **For-profit** Corporation:

Name of Responsible Party (President or CEO ONLY):

Title of Responsible Party:

Physical Address of Responsible Party:

Phone Number of Responsible Party:

Email Address of Responsible Party:

For-profit (Employee Identification Number)

Please include a copy of the the current IRS Nonprofit Affidavit / For Profit

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APPENDIX C
STATEMENT OF REVENUE AND EXPENSES FORM
PRIOR YEAR'S EVENT
(Must be completed)

Name of Event: May Movies in the Park 2016
Date(s) of Event: May 3,10,17,24,31 -

I. REVENUE SOURCES (attach sheet if more space is needed)

		Amount
1.	Sponsorships	34,500.00
2.	Donations	1,813.00
3.	Vendor Donations	560.00
4	Sales	735.00
5.	Jump 4 Kids (staffing payment) (estimated)	500.00
6.		
7.		
8.		
	TOTAL GROSS REVENUE	38,108.00

II. EXPENSES (attach sheet if more space is needed)

1.	Insurance	550.00
2.	Port-a-Let	1,300.00
3.	Music	1400.00
4	Movie Licensing	4,336.00
5.	Permit Fees	230.00
6.	Promotion	3,350.00
7.	Cost of Sale Items	420.00
8.	SPP/PTB Staff	1000.00
9.	Equipment Costs	290.00
10.	Misc. Supplies	75.00
11.	City Parks, Recreation & Police	4,827.00
12.		
	TOTAL OPERATING EXPENSES	17,778.00
	TOTAL NET INCOME	20,330.00

III. ALLOCATION OF NET INCOME (attach sheet if more space is needed)

1.	St. Petersburg Preservation d/b/a Preserve the 'Burg	20,330.00
2.		
3.		
4.		
5.		
6.		
	TOTAL ALLOCATION OF NET INCOME	20,330.00

Prepared by: Peter Belmont Date: 9/11/18

Print Application

Submit Application by Email

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: JAN 14 2012

SAINT PETERSBURG PRESERVATION INC
PO BOX 838
ST PETERSBURG, FL 33731-0838

Employer Identification Number:
59-1898534
DLN:
17053285317001
Contact Person:
PAUL F CAPPEL II ID# 31665
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
170(b)(1)(A)(vi)
Form 990 Required:
Yes
Effective Date of Exemption:
May 15, 2010
Contribution Deductibility:
Yes
Addendum Applies:
Yes

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Sincerely,

Lois G. Lerner
Director, Exempt Organizations

Enclosure: Publication 4221-PC

Letter 947 (DO/CG)

Detail by FEI/EIN Number

Florida Not For Profit Corporation
SAINT PETERSBURG PRESERVATION, INC.

Filing Information

Document Number	741785
FEI/EIN Number	59-1898534
Date Filed	02/23/1978
State	FL
Status	ACTIVE
Last Event	RESTATED ARTICLES
Event Date Filed	11/29/2011
Event Effective Date	NONE

Principal Address

102 FAREHAM PLACE N
ST. PETERSBURG, FL 33701

Changed: 01/22/2014

Mailing Address

P.O. BOX 838
ST. PETERSBURG, FL 33731

Changed: 08/14/1996

Registered Agent Name & Address

BELMONT, PETER
102 FAREHAM PLACE NORTH
SAINT PETERSBURG, FL 33704

Name Changed: 01/26/2011

Address Changed: 01/26/2011

Officer/Director Detail

Name & Address

Title President

ELWYN, EMILY
836 16th Avenue NE
SAINT PETERSBURG, FL 33704

Title Treasurer

Pastman, Peter
2326 Woodlawn Circle West
SAINT PETERSBURG, FL 33704

Title VP

BELMONT, PETER
102 FAREHAM PLACE N
SAINT PETERSBURG, FL 33701

Title Executive Director

Stribling , Allison E
Po Box 1076
Saint Petersburg, FL 33731

Title Secretary

Jeff, Danner
2351 Dartmouth Aveue N
St. Petersburg, FL 33713

Annual Reports

Report Year	Filed Date
2016	03/25/2016
2017	03/20/2017
2018	03/05/2018

Document Images

03/05/2018 -- ANNUAL REPORT	View image in PDF format
03/20/2017 -- ANNUAL REPORT	View image in PDF format
03/25/2016 -- ANNUAL REPORT	View image in PDF format
02/11/2015 -- ANNUAL REPORT	View image in PDF format
01/22/2014 -- ANNUAL REPORT	View image in PDF format
03/07/2013 -- ANNUAL REPORT	View image in PDF format
03/09/2012 -- ANNUAL REPORT	View image in PDF format
11/29/2011 -- Restated Articles	View image in PDF format
01/26/2011 -- ANNUAL REPORT	View image in PDF format
03/29/2010 -- ANNUAL REPORT	View image in PDF format
04/29/2009 -- ANNUAL REPORT	View image in PDF format
05/05/2008 -- ANNUAL REPORT	View image in PDF format
04/09/2007 -- ANNUAL REPORT	View image in PDF format
04/13/2006 -- ANNUAL REPORT	View image in PDF format
05/04/2005 -- ANNUAL REPORT	View image in PDF format
05/03/2004 -- ANNUAL REPORT	View image in PDF format
04/14/2003 -- ANNUAL REPORT	View image in PDF format
05/06/2002 -- ANNUAL REPORT	View image in PDF format

05/17/2001 -- ANNUAL REPORT	View image in PDF format
05/16/2000 -- ANNUAL REPORT	View image in PDF format
03/11/1999 -- ANNUAL REPORT	View image in PDF format
04/28/1998 -- REINSTATEMENT	View image in PDF format
08/14/1996 -- ANNUAL REPORT	View image in PDF format
05/01/1995 -- ANNUAL REPORT	View image in PDF format

Florida Department of State, Division of Corporations

CITY OF ST. PETERSBURG
PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENT APPLICATION

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Date Received: 9-18-18
Check or Cash: 61541362
Application #: 74
Packet: C
Permit #: 25266

Event Title: Run For All Children 5k, 10k & 1-mile fun run Phone No.: 727-767-2490 Fax No.: 727-767-8510

Entity Name: Johns Hopkins All Children's Hospital Federal I.D. Number: 59-2481738

Event Date(s): May 18, 2019 Location: 501 6th Ave S., St. Petersburg, FL 33701

Day 1 of Event: May 18, 2019 Time Gates Open: 7:00 am Ending Time: 10:00 am

Day 2 of Event: NA Time Gates Open: NA Ending Time: NA

Day 3 of Event: NA Time Gates Open: NA Ending Time: NA

Application Prepared by: Deidra Church Phone: 727-767-2490

Title: Events Manager Cell Phone: 812-720-0969

Address: 500 7th Ave. S. City: St. Petersburg State: FL Zip: 33701

Email Address: dchurch6@jhmi.edu

Additional Contact Person: Connie Guinn Day Phone: 727-767-2950

What month/year were you incorporated as nonprofit? 01/84

List all 501(c)3 entities that will benefit from this event. Johns Hopkins All Children's Foundation

Name of the for-profit entity? NA

Describe your event with details.

Johns Hopkins All Children's Hospital is hosting the 6th annual Running For All Children 5k, 10k and 1-mile fun run race on Saturday, May 18, 2019, to raise funds and support healthy living throughout the west coast of Florida.

There will be something for everyone from kids doing a 100 yard dash, a 1 mile fun run for beginners or families, and chip timed 5K & 10K courses.

Describe what economic benefit and impact this event will bring to St. Petersburg.

The primary beneficiary of the event will be the children and families associated with Johns Hopkins All Children's Hospital, but so too will the local businesses benefit by the more than 3,000 anticipated runners, including but not limited to the St. Petersburg area hotels, restaurants, boutique downtown stores and the like.

This will be a "destination" race for many of the athletes who will be traveling to the area from other cities.

Each co-sponsored entity must possess liability insurance naming the City of St. Petersburg as an additional insured and secure said insurance in the amount determined by the City.

Does your group presently have liability insurance? ☒ YES ☐ NO How much? $1,000,000.00

Are there plans to sell or distribute beer/wine at your event? ☒ YES ☐ NO

Will there be an admission / registration fee? ☒ YES ☐ NO Advanced Fee: 30.00 Day of: 40.00

Please provide the website address for your event. runforallchildren.com

Please provide a phone number that can be advertised to the public. 727-767-4199

What is the estimated attendance for this event? Spectators 1000 Participants 2000 Last Year's Total Attendance 2500

Please check the equipment and/or facilities you are requesting.

Recreation Equipment

Showmobile (Yes/No) NO

Bleacher(s) needed. Each bleacher approx. 180 people)

Tables (6 ft) # needed Chairs # needed

Public Address System

# of portable risers needed (4 in. x 8 in. x 16 in. sections)

Special Events Facilities

- ☐ Mahaffey Theater
- ☐ Coliseum
- ☐ Sunken Gardens
- ☐ Boyd Hill

☐ Non-City Locations

Which Location?

Poynter Park

The following departments may provide and charge for additional services. You will be provided cost estimates in your Co-sponsored Agreement.

POLICE:	Public Safety Personnel, Marine Services
TRAFFIC:	Personnel, Equipment (cones, barricades, no parking signs)
FIRE:	Paramedics, Inspectors
PARKS SERVICES:	Cleanup Personnel, Dumpster(s), Trash Receptacles, Event Site Preparation and Restoration
RECREATION SERVICES:	On-site Presence, Logistics Help, Liaison with Other Ddepartments

Note: The City does not provide tents, Port-O-Lets, or large quantities of tables and chairs.

I certify that the event will be open to all citizens and that individuals will not be barred from participation due to race, creed, color, national origin, sex, age, or physical impairment. I understand that a financial report of the event is due in the Parks and Recreation office within 30 days of the completion of the event. I also understand that the City is to be shown as a co-sponsor on any promotional materials produced for the event. I agree to obtain the required liability insurance and to secure all necessary city/county/state permits/licenses. I further certify that the facts contained in this application are accurate.

Name:	Jenine Rabin	Title:	Executive Vice President	Date:	9.17.18
Co-Sign:	Deidra Church	Title:	Events Manager	Date:	9.17.18

NOTE:

a. **If person/entity preparing this application is not representing a nonprofit entity, the application must be co-signed by someone from a sponsoring nonprofit entity. A copy of the sponsoring entity's 501(c)3 designation must accompany this application.**

b. **If your entity has outstanding financial obligations with any department within the City of St. Petersburg, your application will not be processed until debt if paid.**

c. **Applications lacking information or the required completed appendixes listed below will not be processed.**

PLEASE ATTACH THE FOLLOWING

1. Route map for parade, run, walk, and/or bike event.
2. Site map of event and detail schedule of each day's events including open and close times.
3. Complete Appendix B and Appendix C.
4. Check for $30.00 for co-sponsored application processing (non-refundable).
5. Check for park permit fee. See Appendix A for fee structure.
6. A copy of 501(c)3 designation (if applicable)

FOR FURTHER INFORMATION, PLEASE CALL LYNN GORDON, PARKS & RECREATION MANAGER, 727-893-7766 or EMAIL: StPeteEvents@stpete.org

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www.stpete.org

PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENTS
SUMMARY SHEET

st. petersburg parks & recreation

Review and check all conditions which apply to this event: Note the corresponding obligation for each condition.

Condition		Obligation
☒ Public Invited		General Liability Insurance
☒ Located in Park		Park Permit
☐ Vending Product / Merchandise Sales		Occupational License
☐ Vending Food / Beverage		Health Inspection
☒ Vendors / Exhibitors	How many? 10-20 vendors/exhibitors	
☒ Vending Beer / Wine		Alcohol Permit Additional insurance Required
☐ Erecting Tents - Larger than 10ft x 12ft	How many?	Temporary Structure Permit
☐ Fence Installation	What type?	Temporary Structure Permit
☐ Other Structures	What structure?	Temporary Structure Permit
☐ Open Flame Food Preparation		Fire Inspection Permit
☐ Pyrotechnics		Fireworks Permit
☒ Require Street Closure		Parade or Street Closure Permit(s)
☐ VIP Area		
☐ Staging	☐ Professional ☐ Showmobile ☐ Other	
☒ Amplified Sound	☐ Performers ☐ Announcement Only	
☐ Security	☐ Daytime - Private ☐ Overnight - Private ☐ Event Time Frame - SPPD	
☒ Sanitary Facilities - Port-O-Lets	Regular Units TBD Disabled Units Hand Washing	
☐ Off-site Parking / Shuttle		
☐ Semitruck / Tractor Trailer		

Marketing: Please check all that apply.

☒ Invitations	☒ Radio
☒ Posters / Flyers	☐ Television
☐ Newspaper / Internet	☐ Remote Broadcast

City logo should be used in any promotional materials, posters, flyers, ads, website, public service announcements, and press releases.

Electrical Requirements:

Does your event require any power needs using more than the standard 110/20amp located in the parks? ☐ YES ☒ NO

If YES, check all that apply. ☐ RV'S ☐ Coffee Vendors ☐ Ice Bins ☐ Freezers ☐ Ice Cream Vendors ☐ Catering Trucks ☐ Other:

Please explain the details of the above items checked. Tell us how much and what type of power they would require.

NA

Will you supply your own generators? ☒ YES ☐ NO

Will your event have a licensed electrician on-site during the event? ☒ YES ☐ NO If YES, who? ConServ Building Services Inc

Will your event be requesting any variances from City policies or procedures? If YES, please explain.

No

If City permits, licenses, or services are required for event, who will pay for them?

Name: Johns Hopkins All Children's Foundation Phone: 727-767-4199

Address (including zip): 500 7th Ave. South, St. Petersburg, FL 33701

Type of music, # of stages, and # of bands.

NA

List Vending Products. Name & Provider.

NA

For Use of Beer/Wine - Please provide name, address and phone number of the sponsoring 501(c)3 or catering company.

Great Bay Distributors

Explain subject/purpose of all speeches/demonstrations which will occur.

Awards ceremony/presentation

Discuss your load in/load out parking needs, include times and dates.

Participants will arrive near the start/ finish area located at 501 6th Ave. S at approximately 6:45AM on May 18th. Approximately 1/2 of the participants will be finished by 8:00 AM and the remaining participants will be complete the event before 10:00 AM.

Other Comments: Please describe your fee structure.

5k & 10k pre-registered runners: $30.00
5k & 10k day of registration: $40.00

1-mile fun run pre-registered runners: $20.00
1-mile fun run day of registration: $25.00

100 yard Kid's Dash - Free

Other comments:

The attached race route has been the same route for the past two years in St. Petersburg.

I represent and warrant that the purpose of the proposed activity/event and conduct of the sponsor(s) and the participants shall conform to all requirements of law and all ordinances of the State of Florida, Pinellas County, and the City of St. Petersburg including, but not limited to, City noise ordinances and Parks and Recreation Department Policies and Procedures. I acknowledge that failure to observe such laws, ordinances, or policies and procedures will result in an immediate cancellation of the event and all permits.

WITHOUT LIMITING THE GENERALITY OF THE FOREGOING, I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE PARKS AND RECREATION DEPARTMENT POLICIES AND PROCEDURES PERTAINING TO THE USE OF PARKS AND THE PARK RULES SET FORTH IN ARTICLE II, CHAPTER 21, OF THE ST. PETERSBURG CITY CODE, INCLUDING BUT NOT LIMITED TO THE INDEMNIFICATION AND INSPECTION OBLIGATIONS ASSUMED BY ME AND THE PERSON OR ENTITY ON WHOSE BEHALF THIS APPLICATION IS BEING MADE.

I certify that the facts contained in this application are accurate.

Name: Jenine Rabin Title: Executive Vice President Date: 9.17.18

Appendix B
President or CEO
Responsible Party Information

Please complete the information below for each responsible party.

Name of the **Nonprofit** Corporation: Johns Hopkins All Children's Foundation

Name of Responsible Party (President or CEO ONLY): Jenine Rabin

Title of Responsible Party: Executive Vice President

Physical Address of Responsible Party: 500 7th Avenue South, St. Petersburg, FL, 33701

Phone Number of Responsible Party: 727-767-4460

Email Address of Responsible Party: jenine.rabin@jhmi.edu

Nonprofit (Employee Identification Number): 59-2481738

Name of the **For-profit** Corporation: NA

Name of Responsible Party (President or CEO ONLY):

Title of Responsible Party:

Physical Address of Responsible Party:

Phone Number of Responsible Party:

Email Address of Responsible Party:

For-profit (Employee Identification Number)

Please include a copy of the the current IRS Nonprofit Affidavit / For Profit

What method of invoicing would your organization prefer?

☐ BY Mail

Contact Name

Address

City, State, Zip

☒ BY EMAIL

Email Address: dchurch6@jhmi.edu

APPENDIX C
STATEMENT OF REVENUE AND EXPENSES FORM
PRIOR YEAR'S EVENT
(Must be completed)

Name of Event: Run For All Children
Date(s) of Event: May 18, 2019 - May 18, 2019

I. REVENUE SOURCES (attach sheet if more space is needed)

		Amount
1.	See Attached	
2.		
3.		
4		
5.		
6.		
7.		
8.		
	TOTAL GROSS REVENUE	

II. EXPENSES (attach sheet if more space is needed)

1.	See Attached	
2.		
3.		
4		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
	TOTAL OPERATING EXPENSES	
	TOTAL NET INCOME	

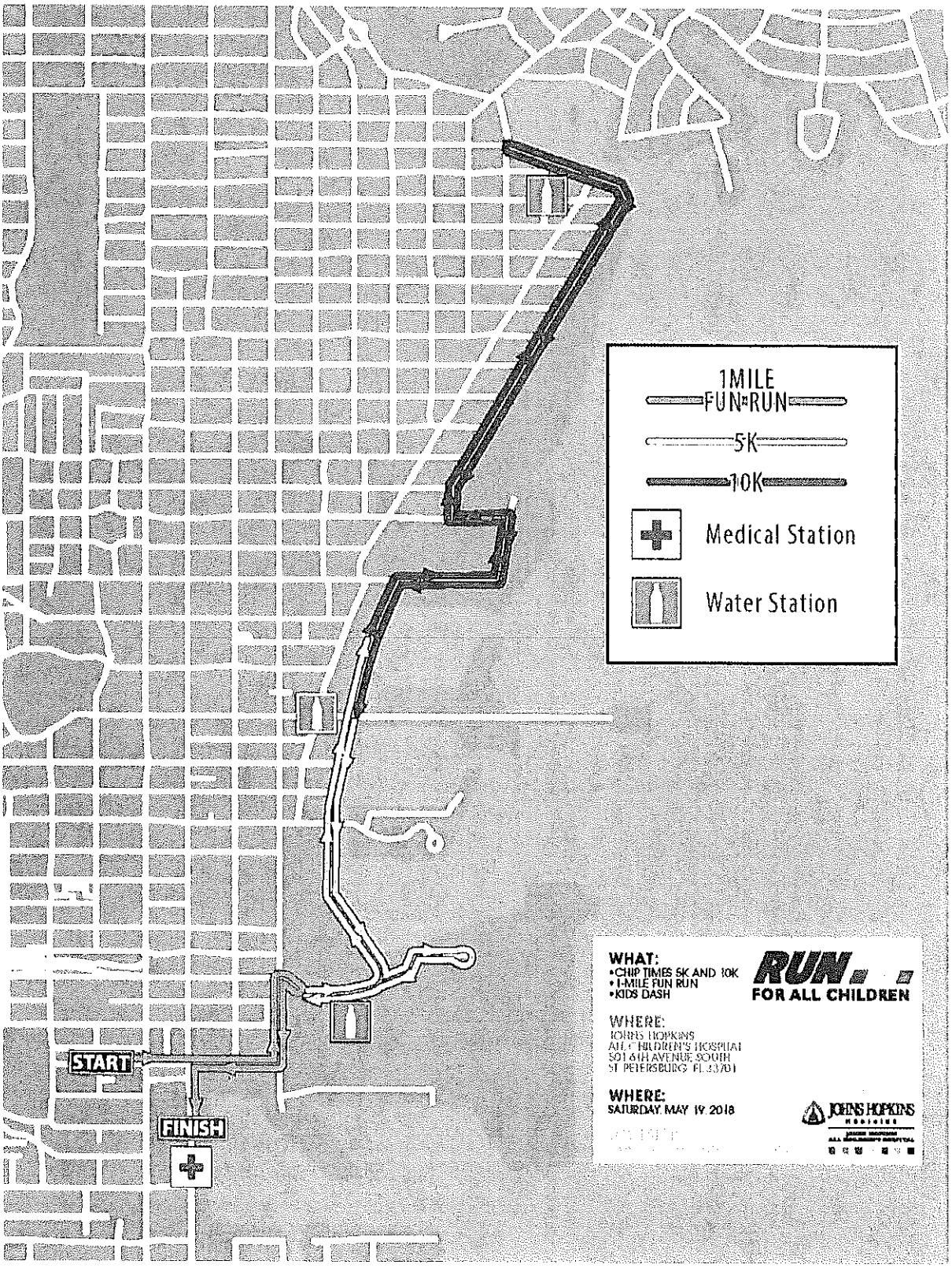
III. ALLOCATION OF NET INCOME (attach sheet if more space is needed)

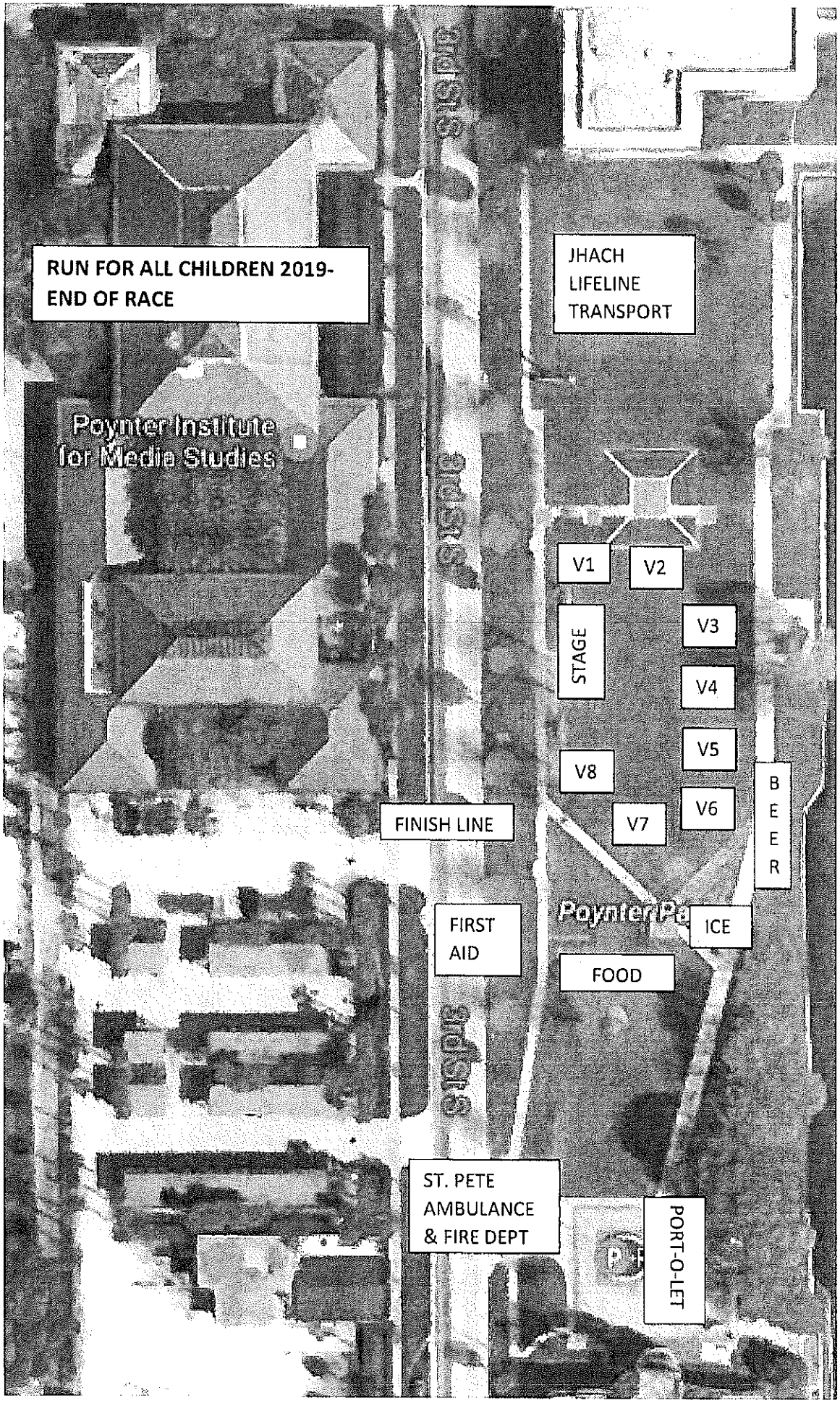
1.	Johns Hopkins All Children's Foundation	
2.		
3.		
4.		
5.		
6.		
	TOTAL ALLOCATION OF NET INCOME	

Prepared by: Deidra Church Date: 9.17.2018

Print Application

Submit Application by Email


1MILE
FUN*RUN
5K
10K
Medical Station
Water Station
START
FINISH
WHAT:
•CHIP TIMES 5K AND 10K
• 1-MILE FUN RUN
•KIDS DASH
RUN.
FOR ALL CHILDREN
WHERE:
JOHNS HOPKINS
ALL CHILDREN'S HOSPITAL
501 6TH AVENUE SOUTH
ST PETERSBURG FL 33701
WHERE:
SATURDAY, MAY 19, 2018
JOHNS HOPKINS


RUN FOR ALL CHILDREN 2019-
END OF RACE
JHACH
LIFELINE
TRANSPORT
Poynter Institute
for Media Studies
V1
V2
V3
V4
V5
V6
V7
V8
STAGE
BEER
FINISH LINE
FIRST
AID
ICE
FOOD
ST. PETE
AMBULANCE
& FIRE DEPT
PORT-O-LET

APPENDIX C

I. REVENUE

Sponsorship	$20,000
Donations	$12,091
Registration Revenue	$53,910
Gross Revenue	$86,001

II. EXPENSES

Materials	437.53
Misc.	570.12
Contracted Services	35235.2
Giveaways/Awards	1228.67
Rentals	2537.09
Total Expenses	40008.61

Net Income	$45,992.39

Allocated to Johns Hopkins All Children's Foundation

0000244 09/23/17

FLORIDA

Consumer's Certificate of Exemption

Issued Pursuant to Chapter 212, Florida Statutes

DR-14
R. 10/15

Certificate Number	Effective Date	Expiration Date	Exemption Category
85-8012640495C-0	11/30/2017	11/30/2022	501(C)(3) ORGANIZATION

This certifies that

ALL CHILDRENS HOSPITAL FOUNDATION INC
501 6TH AVE S
ST PETERSBURG FL 33701-4634

is exempt from the payment of Florida sales and use tax on real property rented, transient rental property rented, tangible personal property purchased or rented, or services purchased.

FLORIDA

Important Information for Exempt Organizations

DR-14
R. 10/15

1. You must provide all vendors and suppliers with an exemption certificate before making tax-exempt purchases. See Rule 12A-1.038, Florida Administrative Code (F.A.C.).

2. Your *Consumer's Certificate of Exemption* is to be used solely by your organization for your organization's customary nonprofit activities.

3. Purchases made by an individual on behalf of the organization are taxable, even if the individual will be reimbursed by the organization.

4. This exemption applies only to purchases your organization makes. The sale or lease to others of tangible personal property, sleeping accommodations, or other real property is taxable. Your organization must register, and collect and remit sales and use tax on such taxable transactions. Note: Churches are exempt from this requirement except when they are the lessor of real property (Rule 12A-1.070, F.A.C.).

5. It is a criminal offense to fraudulently present this certificate to evade the payment of sales tax. Under no circumstances should this certificate be used for the personal benefit of any individual. Violators will be liable for payment of the sales tax plus a penalty of 200% of the tax, and may be subject to conviction of a third-degree felony. Any violation will require the revocation of this certificate.

6. If you have questions regarding your exemption certificate, please contact the Exemption Unit of Account Management at 800-352-3671. From the available options, select "Registration of Taxes," then "Registration Information," and finally "Exemption Certificates and Nonprofit Entities." The mailing address is PO Box 6480, Tallahassee, FL 32314-6480.

Florida Department of State

DIVISION OF CORPORATIONS

Department of State / Division of Corporations / Search Records / Detail By Document Number /

Detail by Entity Name

Florida Not For Profit Corporation
JOHNS HOPKINS ALL CHILDREN'S HOSPITAL, INC.

Filing Information

Document Number	708088
FEI/EIN Number	59-0683252
Date Filed	11/10/1964
State	FL
Status	ACTIVE
Last Event	NAME CHANGE AMENDMENT
Event Date Filed	03/28/2016
Event Effective Date	NONE

Principal Address

501 6TH AVE S
ST PETERSBURG, FL 33701

Changed: 04/29/2010

Mailing Address

501 6TH AVE S
ST PETERSBURG, FL 33701

Changed: 04/29/2010

Registered Agent Name & Address

CRAIN, JACKIE
501 6TH AVE S
LEGAL, 6500002700
ST PETERSBURG, FL 33701

Name Changed: 04/27/2012

Address Changed: 05/01/2017

Officer/Director Detail

Name & Address

Title P, CEO, Vice Dean, Trustee

ELLEN, JONATHAN MD
501 6TH AVE S
ST PETERSBURG, FL 33701

Title President of the Member, Corporate VC, Trustee

PETERSON, RONALD R
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

CANNOVA, MICHAEL
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

DOLAN, VINCENT
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

HAMILTON, NANCY
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

HOLLAND, TROY W
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

KOBREN, ERIC M
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee, VC

LANE, WILLIAM R, Jr.
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee, Secretary

LECLAIR, DARRYL
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

LETTELLEIR, MARK

501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

MAHAFFEY, THOMAS
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

MONDELLO, MARK
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

RAYMUND, STEVEN A
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

SHER, CRAIG
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

SMITH, RAYMOND P
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

FLEECE, JOSEPH W, III
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee, Chairman

Stroud, J. Mark
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee, Treasurer

Coppedge, J. Kenneth
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

Barber, Timothy R
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

Goforth, Stephanie
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee, Treasurer

Kirkland, Jack W, Jr.
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

Miller, Milton H, Jr
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

Horner, William H
501 6TH AVE S
ST PETERSBURG, FL 33701

Title VP

Mueller, Brigitta U
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee, Chairman

Diamond, Sandra
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

hawkins, dwayne
501 6TH AVE S
ST PETERSBURG, FL 33701

Title EVP, COO

alessi, Roberta
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Asst. Secretary

reyes, tammy
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

Cotter, Jennifer
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

LaPrade, Mark
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

Repar, Lawrence
501 6TH AVE S
ST PETERSBURG, FL 33701

Title VP, CSO

Crain, Jackie
501 6TH AVE S
ST PETERSBURG, FL 33701

Title VP

DeLeon, Marcos
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

Cheng, Tina, Dr.
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

Ellerson, Brian
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee, Chief of Medical Staff

Hess, Derek, Dr.

501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

James, Court
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

Sierens-Martin, Gayle
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

Swart, Nancy
501 6TH AVE S
ST PETERSBURG, FL 33701

Title Trustee

Taylor, Troy
501 6TH AVE S
ST PETERSBURG, FL 33701

Title VP

Berfield, Kimberly
501 6TH AVE S
ST PETERSBURG, FL 33701

Title VP

McLendon, John
501 6TH AVE S
ST PETERSBURG, FL 33701

Title VP

Ameen, Sylvia
501 6TH AVE S
ST PETERSBURG, FL 33701

Title VP, CFO

Whitby, Christopher
501 6TH AVE S
ST PETERSBURG, FL 33701

Annual Reports

Report Year	Filed Date

2016	04/29/2016
2017	05/01/2017
2018	05/01/2018

Document Images

05/01/2018 -- ANNUAL REPORT	View image in PDF format
05/01/2017 -- ANNUAL REPORT	View image in PDF format
04/29/2016 -- ANNUAL REPORT	View image in PDF format
03/28/2016 -- Name Change	View image in PDF format
04/30/2015 -- ANNUAL REPORT	View image in PDF format
04/30/2014 -- ANNUAL REPORT	View image in PDF format
04/30/2013 -- ANNUAL REPORT	View image in PDF format
04/27/2012 -- ANNUAL REPORT	View image in PDF format
04/29/2011 -- ANNUAL REPORT	View image in PDF format
03/31/2011 -- Amended and Restated Articles	View image in PDF format
04/29/2010 -- ANNUAL REPORT	View image in PDF format
04/29/2009 -- ANNUAL REPORT	View image in PDF format
04/28/2008 -- ANNUAL REPORT	View image in PDF format
04/27/2007 -- ANNUAL REPORT	View image in PDF format
04/26/2006 -- ANNUAL REPORT	View image in PDF format
04/12/2005 -- ANNUAL REPORT	View image in PDF format
04/30/2004 -- ANNUAL REPORT	View image in PDF format
04/28/2003 -- ANNUAL REPORT	View image in PDF format
11/18/2002 -- Reg. Agent Change	View image in PDF format
05/08/2002 -- ANNUAL REPORT	View image in PDF format
05/07/2001 -- ANNUAL REPORT	View image in PDF format
05/18/2000 -- ANNUAL REPORT	View image in PDF format
04/29/1999 -- ANNUAL REPORT	View image in PDF format
06/25/1998 -- ANNUAL REPORT	View image in PDF format
05/19/1997 -- ANNUAL REPORT	View image in PDF format
05/01/1996 -- ANNUAL REPORT	View image in PDF format
04/27/1995 -- ANNUAL REPORT	View image in PDF format

st.petersburg

Contract/Permit

Contract #: 25266
Date: 24 Oct 2018

User: JSBENNIN
Status: Firm

JOHNS HOPKINS ALL CHILDRENS HOSPITAL INC
DEIDRA CHURCH
501 6TH AVE S
ST PETERSBURG FL 33701 USA

Primary #: (727) 767-8831
Secondary #: ()
Other #: ()

Purpose of Use: RUNNING FOR ALL CHILDREN

Expected: 2,000

Co-Sponsored Event

Contract Balance $0.00

Conditions of Use: Insurance Required

Other Information:

Use of beer and wine	Yes
Use of fencing	Yes
Use of liquor	No

Date(s) and Time(s) of Use: **Starting: Fri 17 May 19 06:00 am** **Ending: Sun 19 May 19 09:00 pm**

Facility/Equipment	Day	Date	Time	Fee	Extra Fee	Tax	Total
Poynter Park	Fri	17 May 2019	06:00 AM	$0.00	$200.00	$0.00	$200.00
Park		19 May 2019	09:00 PM				

Additional Fees:

Extra Fee	Quantity	Charge	Tax	Total
Co-Sponsored Application Fee	1	$30.00	$0.00	$30.00
				$30.00

Extra Fee - Bookings	Hours	Quantity	Charge	Tax	Total
Co-Sponsored Permit Fee	63:00	1	$200.00	$0.00	$200.00
		1	$200.00	$0.00	$200.00

Charges:

Fees	Extra Fees	Tax	Total	Deposit	Total Applied	Contract Balance	Account Balance
$ 0.00	$230.00	$0.00	$230.00	$0.00	$230.00	$0.00	$0.00

Balance of rental due and payable immediately.

Payments:

Date	Amount	Payment Type	Reference	Receipt Number
24 Oct 2018	$230.00	Check	Rental	3181182

Additional Notes:

I have read this Agreement and agree to comply with the terms and conditions set forth in this Agreement. I also understand this Agreement is not final until approved and executed by the Parks and Recreation Superintendent or designee.

By:(Sign Name) _____

(Print Name) **DEIDRA CHURCH**

JOHNS HOPKINS ALL CHILDRENS HOSPITAL INC
Name of User Organization, If Applicable

CITY OF ST. PETERSBURG, FLORIDA

By:(Sign Name): _____
Parks and Recreation Superintendent

(Print Name) _____
Parks and Recreation Department

Supervisor II / Foreman	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:

The Americans with Disabilities Act (A.D.A.) guarantees equal opportunity for people with disabilities. Special accommodation requests such as sign language interpreters, taped or Braille materials, assistive listening devices, etc., should be made at least one week prior to the activity or program. Individuals using TTD devices, please contact us using the Florida Relay Service at 800-955-8771.

st.petersburg

City of St. Petersburg

JOHNS HOPKINS ALL CHILDRENS HOSPITAL INC
DEIDRA CHURCH
501 6TH AVE S
ST PETERSBURG, FL 33701 USA

Receipt #: 3181182
User: JSBENNIN
Issued: Wed 24 Oct 18 09:06 am

Description	Amount
Previous Balance	$230.00
Applied To: 25266 - RUNNING FOR ALL CHILDREN Poynter Park - Park May 17, 2019 6:00 am to May 19, 2019 9:00 pm	$230.00
Payment: Check	($230.00)
Balance	$0.00

APPROVED REFUNDS ARE BY CHECK ONLY

CITY OF ST. PETERSBURG
PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENT APPLICATION

st.petersburg
www.stpete.org

st. petersburg parks & recreation

Date Received: 10-10-18
Check or Cash:
Application #: 75
Packet: C
Permit #: 25382

Event Title: SPC/USFSP Art & Music Festival Phone No.: 727-341-4261 Fax No.: 727-444-6576

Entity Name: St. Petersburg College Federal I.D. Number: 521211489

Event Date(s): April 6, 2019 Location: Williams Park

Day 1 of Event: April 6, 2019 Time Gates Open: 10am Ending Time: 5pm

Day 2 of Event: Time Gates Open: Ending Time:

Day 3 of Event: Time Gates Open: Ending Time:

Application Prepared by: Frank Jurkovic Phone: 727-341-4261

Title: Student Life & Leadership Coordinator Cell Phone: 727-403-4133

Address: 244 2nd Ave. N City: St. Petersburg State: FL Zip: 33701

Email Address: jurkovic.frank@spcollege.edu

Additional Contact Person: Kathy Vanderwerf Day Phone: 727-341-7974

What month/year were you incorporated as nonprofit? 1979

List all 501(c)3 entities that will benefit from this event. St. Petersburg College Foundation

Name of the for-profit entity?

Describe your event with details.

This one-day SPC-USFSP Music & Art festival will have student bands perform and student artwork on display for the public to gather for a fun day in Williams Park open free to the public. It will also include a children's play area so families can enjoy the park and still enjoy the music. An art gallery will be setup in the park displaying various artwork from students.
Food trucks will be on hand selling food throughout the event.
The event is free to all and will wrap up with a headliner band.
SPC and USFSP Student Governments have partnered on this event in order to provide students, alumni and the public a great place to interact and to see two education pillars in the community working together.

Describe what economic benefit and impact this event will bring to St. Petersburg.

Throughout the music and art festival, patrons will be able to visit downtown St. Petersburg to grab a bite to eat or dinner after the festival. This will attract a large amount of people to St. Petersburg on a Saturday, providing the potential for them to spend dollars in the St. Petersburg area. In addition, we will be using local food trucks and partnering with the Palladium Theater.

ach co-sponsored entity must possess liability insurance naming the City of St. Petersburg as an additional insured and secure said nsurance in the amount determined by the City.

'oes your group presently have liability insurance? ☒ YES ☐ NO How much? 1,000,000

re there plans to sell or distribute beer/wine at your event? ☐ YES ☒ NO

/ill there be an admission / registration fee? ☐ YES ☒ NO Advanced Fee: Day of:

lease provide the website address for your event. www.spcollege.edu

lease provide a phone number that can be advertised to the public. 727-341-4772

'hat is the estimated attendance for this event? Spectators 750 Participants 25 Last Year's Total Attendance

Please check the equipment and/or facilities you are requesting.

Recreation Equipment

Showmobile (Yes/No)

Bleacher(s) needed. Each bleacher approx. 180 people)

Tables (6 ft) # needed 10 Chairs # needed 20

Public Address System

# of portable risers needed (4 in. x 8 in. x 16 in. sections)

Special Events Facilities

- ☐ Mahaffey Theater
- ☐ Coliseum
- ☐ Sunken Gardens
- ☐ Boyd Hill

☐ Non-City Locations

Which Location?

Williams Park

The following departments may provide and charge for additional services. You will be provided cost estimates in your Co-sponsored Agreement.

POLICE:	Public Safety Personnel, Marine Services
TRAFFIC:	Personnel, Equipment (cones, barricades, no parking signs)
FIRE:	Paramedics, Inspectors
PARKS SERVICES:	Cleanup Personnel, Dumpster(s), Trash Receptacles, Event Site Preparation and Restoration
RECREATION SERVICES:	On-site Presence, Logistics Help, Liaison with Other Ddepartments

Note: **The City does not provide tents, Port-O-Lets, or large quantities of tables and chairs.**

I certify that the event will be open to all citizens and that individuals will not be barred from participation due to race, creed, color, national origin, sex, age, or physical impairment. I understand that a financial report of the event is due in the Parks and Recreation office within 30 days of the completion of the event. I also understand that the City is to be shown as a co-sponsor on any promotional materials produced for the event. I agree to obtain the required liability insurance and to secure all necessary city/county/state permits/licenses. I further certify that the facts contained in this application are accurate.

Name: Jamelle J. Conner, Ph.D. Title: Vice President, Student Services Date: 10/10/18

Co-Sign: Title: Date:

NOTE: a. **If person/entity preparing this application is not representing a nonprofit entity, the application must be co-signed by someone from a sponsoring nonprofit entity. A copy of the sponsoring entity's 501(c)3 designation must accompany this application.**

b. **If your entity has outstanding financial obligations with any department within the City of St. Petersburg, your application will not be processed until debt if paid.**

c. **Applications lacking information or the required completed appendixes listed below will not be processed.**

PLEASE ATTACH THE FOLLOWING

1. Route map for parade, run, walk, and/or bike event.
2. Site map of event and detail schedule of each day's events including open and close times.
3. Complete Appendix B and Appendix C.
4. Check for $30.00 for co-sponsored application processing (non-refundable).
5. Check for park permit fee. See Appendix A for fee structure.
6. A copy of 501(c)3 designation (if applicable)

FOR FURTHER INFORMATION, PLEASE CALL LYNN GORDON, PARKS & RECREATION MANAGER.
727-893-7766 or EMAIL: StPeteEvents@stpete.org

st.petersburg
www.stpete.org

PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENTS
SUMMARY SHEET

st. petersburg parks & recreation

Review and check all conditions which apply to this event: Note the corresponding obligation for each condition.

Condition		Obligation
☒ Public Invited		General Liability Insurance
☒ Located in Park		Park Permit
☐ Vending Product / Merchandise Sales		Occupational License
☒ Vending Food / Beverage		Health Inspection
☐ Vendors / Exhibitors	How many?	
☐ Vending Beer / Wine		Alcohol Permit Additional insurance Required
☐ Erecting Tents - Larger than 10ft x 12ft	How many?	Temporary Structure Permit
☐ Fence Installation	What type?	Temporary Structure Permit
☐ Other Structures	What structure?	Temporary Structure Permit
☐ Open Flame Food Preparation		Fire Inspection Permit
☐ Pyrotechnics		Fireworks Permit
☐ Require Street Closure		Parade or Street Closure Permit(s)
☐ VIP Area		
☒ Staging	☒ Professional ☐ Showmobile ☐ Other	
☐ Amplified Sound	☐ Performers ☐ Announcement Only	
☒ Security	☒ Daytime - Private ☐ Overnight - Private ☒ Event Time Frame - SPPD	
☒ Sanitary Facilities - Port-O-Lets	Regular Units 9 Disabled Units 1 Hand Washing	
☒ Off-site Parking / Shuttle		
☐ Semitruck / Tractor Trailer		

Marketing: Please check all that apply.

☒ Invitations
☒ Posters / Flyers
☒ Newspaper / Internet
☐ Radio
☐ Television
☐ Remote Broadcast

City logo should be used in any promotional materials, posters, flyers, ads, website, public service announcements, and press releases.

Electrical Requirements:

Does your event require any power needs using more than the standard 110/20amp located in the parks? ☐ YES ☒ NO

If YES, check all that apply. ☐ RV'S ☐ Coffee Vendors ☐ Ice Bins ☐ Freezers ☐ Ice Cream Vendors ☐ Catering Trucks ☐ Other:

Please explain the details of the above items checked. Tell us how much and what type of power they would require.

Will you supply your own generators? ☐ YES ☒ NO

Will your event have a licensed electrician on-site during the event? ☐ YES ☒ NO If YES, who?

Will your event be requesting any variances from City policies or procedures? If YES, please explain.

If City permits, licenses, or services are required for event, who will pay for them?

Name: St. Petersburg College Phone: 727-341-3370

Address (including zip): PO Box 13489, St. Petersburg, FL 33733

Type of music, # of stages, and # of bands.

Various Genre based on student bands, 1 Stage, 6 bands.

List Vending Products. Name & Provider.

4-6 Various Licensed Food Trucks

For Use of Beer/Wine - Please provide name, address and phone number of the sponsoring 501(c)3 or catering company.

Explain subject/purpose of all speeches/demonstrations which will occur.

Discuss your load in/load out parking needs, include times and dates.

3 hours on the load in (starting at 7am)
2 hours on the load out (done by 7pm)

Other Comments: Please describe your fee structure.

No fees will be collected for this event and costs will be covered by the USFSP and SPC Student Government organizations.

Other comments:

I represent and warrant that the purpose of the proposed activity/event and conduct of the sponsor(s) and the participants shall conform to all requirements of law and all ordinances of the State of Florida, Pinellas County, and the City of St. Petersburg including, but not limited to, City noise ordinances and Parks and Recreation Department Policies and Procedures. I acknowledge that failure to observe such laws, ordinances, or policies and procedures will result in an immediate cancellation of the event and all permits.

WITHOUT LIMITING THE GENERALITY OF THE FOREGOING, I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE PARKS AND RECREATION DEPARTMENT POLICIES AND PROCEDURES PERTAINING TO THE USE OF PARKS AND THE PARK RULES SET FORTH IN ARTICLE II, CHAPTER 21, OF THE ST. PETERSBURG CITY CODE, INCLUDING BUT NOT LIMITED TO THE INDEMNIFICATION AND INSPECTION OBLIGATIONS ASSUMED BY ME AND THE PERSON OR ENTITY ON WHOSE BEHALF THIS APPLICATION IS BEING MADE.

I certify that the facts contained in this application are accurate.

Name: Jamelle J. Conner Title: Jamelle J. Conner, Ph.D.
Vice President, Student Services Date: 10/10/18

APPROVED
AS TO FORM AND CONTENT
MSpa
GENERAL COUNSEL
Approved by: JC
On: 10/4/18

Appendix A

Co-Sponsored Event Park Fee Structure

* Events in Vinoy Park will be assessed $300.00 per event day (e.g., 1 day event $300.00, 2 days = $600.00, 3 days or more = $900.00.) This includes the $30.00 park permit fee.

* Events in any other park will be assessed $200.00 per event day (e.g., 1 day event = $200.00, 2 days = $400.00, 3 or more days = $600.00). This includes the $30.00 park permit fee.

* The above fees will be due at the time you submit your application plus the $30.00 co-sponsored application fee.

* All co-sponsored event applications must be submitted at least 6 month prior to the event.

* Any application for a co-sponsored event submitted inside the six (6) month time frame will be assessed a non refundable $1,200.00 late fee.

* **The City requires payment in advance for all City services estimated and/or provided for first time events and one of a kind nonrecurring events.**

* **Payment will be required at least ten (10) business days prior to the start of the event and shall be in the form of cash, certified check, or an irrevocable bank letter of credit.**

* **All first time entities requesting events will be required to complete a credit application.**

Appendix B
President or CEO
Responsible Party Information

Please complete the information below for each responsible party.

Name of the **Nonprofit** Corporation: St. Petersburg College Foundation Inc.

Name of Responsible Party (President or CEO ONLY): Jody Collins

Title of Responsible Party: Development Officer

Physical Address of Responsible Party: PO Box 13489, St. Petersburg, FL 33733

Phone Number of Responsible Party: 727-341-3302

Email Address of Responsible Party: collins.jody@spcollege.edu

Nonprofit (Employee Identification Number): 59-1954362

Name of the **For-profit** Corporation:

Name of Responsible Party (President or CEO ONLY):

Title of Responsible Party:

Physical Address of Responsible Party:

Phone Number of Responsible Party:

Email Address of Responsible Party:

For-profit (Employee Identification Number)

Please include a copy of the the current IRS Nonprofit Affidavit / For Profit

What method of invoicing would your organization prefer?

☒ BY Mail

Contact Name: Frank Jurkovic - SPC Student Life

Address: PO Box 13489

City, State, Zip: St. Petersburg, FL 33733

☐ BY EMAIL

Email Address:

APPENDIX C
STATEMENT OF REVENUE AND EXPENSES FORM
PRIOR YEAR'S EVENT
(Must be completed)

Name of Event: SPC USFSP Art & Music Festival

Date(s) of Event: Apr 6, 2019 - Apr 6, 2019

I. REVENUE SOURCES (attach sheet if more space is needed)

		Amount
1.	USF St. Petersburg Student Government Association	$5,000.00
2.	SPC Student Government Association	$17,000.00
3.		
4		
5.		
6.		
7.		
8.		
	TOTAL GROSS REVENUE	$22,000.00

II. EXPENSES (attach sheet if more space is needed)

1.	Police	$750.00
2.	Marketing/Advertising	$500.00
3.	Porta Potties	$2,000.00
4	Sound Equipment/Staff (From Palladium)	$1,000.00
5.	Headliner Band	$9,000.00
6.	Children's Area	$2,000.00
7.	Food Truck (free meals for students)	$2,100.00
8.	Student Bands	$2,000.00
9.	Miscellaneous Fees/Reserves	$2,650.00
10.		
11.		
12.		
	TOTAL OPERATING EXPENSES	$22,000.00
	TOTAL NET INCOME	$0.00

III. ALLOCATION OF NET INCOME (attach sheet if more space is needed)

1.		
2.		
3.		
4.		
5.		
6.		
	TOTAL ALLOCATION OF NET INCOME	

Prepared by: Frank Jurkovic

Date: Sep 25, 2018

Print Application

Submit Application by Email

SPC/USFSP Arts and Music Festival Schedule of Bands

10:30am – Student Band #1

11:45am – Student Band #2

12:45pm – Student Band #3

2pm – Student Band #4

3:15pm – Student Band #5

4:15pm – Final Headliner Band

Florida Department of State

DIVISION OF CORPORATIONS

Department of State / Division of Corporations / Search Records / Detail By Document Number /

Detail by Entity Name

Florida Not For Profit Corporation
ST. PETERSBURG COLLEGE FOUNDATION, INC.

Filing Information

Document Number	749635
FEI/EIN Number	59-1954362
Date Filed	11/02/1979
State	FL
Status	ACTIVE
Last Event	NAME CHANGE AMENDMENT
Event Date Filed	12/07/2001
Event Effective Date	NONE

Principal Address

6021 142ND AVE NORTH
CLEARWATER, FL 33760

Changed: 01/22/2016

Mailing Address

PO BOX 13489
SAINT PETERSBURG, FL 33733

Changed: 03/10/2006

Registered Agent Name & Address

GARDNER, SUZANNE L
6021 142ND AVE N
CLEARWATER, FL 33760

Name Changed: 01/12/2011

Address Changed: 02/22/2008

Officer/Director Detail

Name & Address

Title D

BLANTON, JOSEPH G
880 CARILLON PARKWAY
CLEARWATER, FL 33716

Title D

CHERVEN, KENNETH P
9401 MERRIMOOR BLVD.
LARGO, FL 33777

Title T

LOCKHART, AMY
6021 142ND AVE NORTH
LARGO, FL 33760

Title D

COLE, STEPHEN O
625 COURT STREET
CLEARWATER, FL 33757

Title D

MCCLOUD, BILL
18740 HILLSTONE DRIVE
ODESSA, FL 33556

Title Secretary

NEU, FRANCES Z
6021 142ND AVE NORTH
LARGO, FL 33760

Title D

HORNER, BETH A
601 BAYSHORE BLVD.
SUITE 960
TAMPA, FL 33606

Title D

SHEPARD, STEVEN R
570 CARILLON PARKWAY
ST. PETERSBURG, FL 33716

Title D

SHIKARPURI , SHAN
2656 W. LAKE ROAD
PALM HARBOR, FL 34684

Title D

WINNING, RICHARD B

10490 GANDY BLVD. NORTH
ST. PETERSBURG, FL 33702

Title D

FINE, ROBERT J
501 PARK STREET N
ST. PETERSBURG, FL 33710

Title D

DEMIRDJIAN, PAUL
3000 BAYPORT DRIVE
TAMPA, FL 33607

Title D

COLE, KATHERINE E
600 CLEVELAND STREET
SUITE 800
CLEARWATER, FL 33755

Title D

HILTON, ROBERT L
880 CARILLON PARKWAY
32E
ST. PETERSBURG, FL 33716

Title D

Beltz-McCourt , Angie
5350 Tech Data Drive
A4-12
Clearwater, FL 33760

Title D

Carroll, Michael R
1344 Monterey Blvd. NE
St. Petersburg, FL 33704

Annual Reports

Report Year	Filed Date
2016	01/22/2016
2017	01/06/2017
2018	01/19/2018

Document Images

01/19/2018 -- ANNUAL REPORT	View image in PDF format
01/06/2017 -- ANNUAL REPORT	View image in PDF format
01/22/2016 -- ANNUAL REPORT	View image in PDF format

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St. Petersburg, FL 33704

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Document Images

01/19/2018 -- ANNUAL REPORT	View image in PDF format
01/06/2017 -- ANNUAL REPORT	View image in PDF format
01/22/2016 -- ANNUAL REPORT	View image in PDF format

st.petersburg

Contract/Permit

Contract #: 25382
Date: 06 Nov 2018

User: JSBENNIN
Status: Firm

ST PETERSBURG COLLEGE
FRANK JURKOVIC
6605 5TH AVE N
ST PETERSBURG FL 33733 USA

Primary #: (727) 614-7264
Secondary #: (727)
Other #: ()

Purpose of Use: SPC/USFSP ART & MUSIC FESTIVAL

Expected: 1,000

Co-Sponsored Event

Contract Balance $200.00

Conditions of Use: Insurance Required

Other Information:

Use of beer and wine	No
Use of fencing	No
Use of liquor	No

Date(s) and Time(s) of Use: **Starting: Fri 05 Apr 19 06:00 am** **Ending: Sat 06 Apr 19 09:00 pm**

Facility/Equipment	Day	Date	Time	Fee	Extra Fee	Tax	Total
Williams Park	Fri	05 Apr 2019	06:00 AM	$0.00	$200.00	$0.00	$200.00
Park		06 Apr 2019	09:00 PM				

Additional Fees:

Extra Fee	Quantity	Charge	Tax	Total
Co-Sponsored Application Fee	1	$30.00	$0.00	$30.00
				$30.00

Extra Fee - Bookings	Hours	Quantity	Charge	Tax	Total
Co-Sponsored Permit Fee	39:00	1	$200.00	$0.00	$200.00
		1	$200.00	$0.00	$200.00

Charges:

Fees	Extra Fees	Tax	Total	Deposit	Total Applied	Contract Balance	Account Balance
$ 0.00	$230.00	$0.00	$230.00	$0.00	$30.00	$200.00	$200.00

Balance of rental due and payable immediately.

Payments:

Date	Amount	Payment Type	Reference	Receipt Number
06 Nov 2018	$30.00	Check	Rental	3188255

Additional Notes:

I have read this Agreement and agree to comply with the terms and conditions set forth in this Agreement. I also understand this Agreement is not final until approved and executed by the Parks and Recreation Superintendent or designee.

By:(Sign Name) _____

(Print Name) **FRANK JURKOVIC**

ST PETERSBURG COLLEGE
Name of User Organization, If Applicable

CITY OF ST. PETERSBURG, FLORIDA

By:(Sign Name): _____
Parks and Recreation Superintendent

(Print Name) _____
Parks and Recreation Department

Supervisor II / Foreman	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:

The Americans with Disabilities Act (A.D.A.) guarantees equal opportunity for people with disabilities. Special accommodation requests such as sign language interpreters, taped or Braille materials, assistive listening devices, etc., should be made at least one week prior to the activity or program. Individuals using TTD devices, please contact us using the Florida Relay Service at 800-955-8771.

st.petersburg

City of St. Petersburg

ST PETERSBURG COLLEGE
KEVIN GORDON
6605 5TH AVE N
ST PETERSBURG, FL 33733 USA

Receipt #: 3188255
User: JSBENNIN
Issued: Tue 06 Nov 18 08:42 am

Description	Amount
Previous Balance	$230.00
Applied To: 25382 - SPC/USFSP ART & MUSIC FESTIVAL Williams Park - Park April 5, 2019 6:00 am to April 6, 2019 9:00 pm	$30.00
Payment: Check	($30.00)
Balance	$200.00

APPROVED REFUNDS ARE BY CHECK ONLY

INVOICE

Date: **10/11/2018**

City of St. Petersburg
PO BOX 2842
ST. PETERSBURG FL 33731
[Phone]

VENDOR# 2758
PO# 106351-2
VOUCHER# 614906
INPUT ON 10/11/18
fdw

RECEIVED 2018 OCT 11 A 11:26

Initiating Department: Student Life - DT	
Name of Dept Contact: Kathy Venderwerf	
Contact Phone Number: 341-7974	

Bill To:
St. Petersburg College
Attn: Accounts Payable
PO Box 13489
St. Petersburg, FL 33733

Description	Amount
[Please include date of service or event in description (see example)]	
Permit fee for use of Williams Park. Event date April 6, 2019	$30.00
SPC PO 106351	

RECEIVED 2018 OCT 11 P 1:21

Balance Due	$30.00

RR

CITY OF ST. PETERSBURG
PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENT APPLICATION

st.petersburg
www.stpete.org

st. petersburg parks & recreation

Date Received: 10-10-18
Check or Cash:
Application #: 76
Packet: B
Permit #: 25383

Event Title: Special Olympics Florida Area 6 Summer Games Phone No.: 813-857-8685 Fax No.:

Entity Name: Special Olympics Florida Federal I.D. Number:

Event Date(s): March 30, 2019 Location: Lakewood High School

Day 1 of Event: 3/30/19 Time Gates Open: 7am Ending Time: 4pm

Day 2 of Event: Time Gates Open: Ending Time:

Day 3 of Event: Time Gates Open: Ending Time:

Application Prepared by: Cydni Weiner Phone: 813-857-8685

Title: Special Olympics Pinellas County Director Cell Phone: 813-857-8685

Address: 2235 NE Coachman Rd City: Clearwater State: FL Zip: 33765

Email Address: cydniweiner@sofl.org

Additional Contact Person: Bankole Adebanjo Day Phone: 407-913-9728

What month/year were you incorporated as nonprofit? June 1972

List all 501(c)3 entities that will benefit from this event. Special Olympics Florida

Name of the for-profit entity?

Describe your event with details.

The Area 6 Summer Games is a culminating day of athletic competition for athletes with intellectual and developmental disabilities. Athletes from several surrounding counties come to compete in Soccer, Volleyball, Track and Field, Bocce and Tennis. This event is a great day, where our community can come celebrate our athletes successes, bravery and sportsmanship.

Describe what economic benefit and impact this event will bring to St. Petersburg.

This event exemplifies diversity and inclusion in Pinellas County.

Each co-sponsored entity must possess liability insurance naming the City of St. Petersburg as an additional insured and secure said insurance in the amount determined by the City.

Does your group presently have liability insurance? ☒ YES ☐ NO How much?

Are there plans to sell or distribute beer/wine at your event? ☐ YES ☒ NO

Will there be an admission / registration fee? ☐ YES ☒ NO Advanced Fee: Day of:

Please provide the website address for your event.

Please provide a phone number that can be advertised to the public. 813-857-8685

What is the estimated attendance for this event? Spectators 500 Participants 490 Last Year's Total Attendance 1000

Please check the equipment and/or facilities you are requesting.

Recreation Equipment

Showmobile (Yes/No)

Bleacher(s) needed. Each bleacher approx. 180 people)

Tables (6 ft) # needed 25 Chairs # needed 150

Public Address System Speakers/Microphone

# of portable risers needed (4 in. x 8 in. x 16 in. sections)

Special Events Facilities

- ☐ Mahaffey Theater
- ☐ Coliseum
- ☐ Sunken Gardens
- ☐ Boyd Hill

☐ Non-City Locations

Which Location?

Lakewood High School

The following departments may provide and charge for additional services. You will be provided cost estimates in your Co-sponsored Agreement.

POLICE:	Public Safety Personnel, Marine Services
TRAFFIC:	Personnel, Equipment (cones, barricades, no parking signs)
FIRE:	Paramedics, Inspectors
PARKS SERVICES:	Cleanup Personnel, Dumpster(s), Trash Receptacles, Event Site Preparation and Restoration
RECREATION SERVICES:	On-site Presence, Logistics Help, Liaison with Other Ddepartments

Note: The City does not provide tents, Port-O-Lets, or large quantities of tables and chairs.

I certify that the event will be open to all citizens and that individuals will not be barred from participation due to race, creed, color, national origin, sex, age, or physical impairment. I understand that a financial report of the event is due in the Parks and Recreation office within 30 days of the completion of the event. I also understand that the City is to be shown as a co-sponsor on any promotional materials produced for the event. I agree to obtain the required liability insurance and to secure all necessary city/county/state permits/licenses. I further certify that the facts contained in this application are accurate.

Name:	Cydni Weiner	Title:	County Director	Date:	10/2/18
Co-Sign:		Title:		Date:	

NOTE:
a. **If person/entity preparing this application is not representing a nonprofit entity, the application must be co-signed by someone from a sponsoring nonprofit entity. A copy of the sponsoring entity's 501(c)3 designation must accompany this application.**
b. **If your entity has outstanding financial obligations with any department within the City of St. Petersburg, your application will not be processed until debt if paid.**
c. **Applications lacking information or the required completed appendixes listed below will not be processed.**

PLEASE ATTACH THE FOLLOWING

1. Route map for parade, run, walk, and/or bike event.
2. Site map of event and detail schedule of each day's events including open and close times.
3. Complete Appendix B and Appendix C.
4. Check for $30.00 for co-sponsored application processing (non-refundable).
5. Check for park permit fee. See Appendix A for fee structure.
6. A copy of 501(c)3 designation (if applicable)

FOR FURTHER INFORMATION, PLEASE CALL LYNN GORDON, PARKS & RECREATION MANAGER, 727-893-7766 or EMAIL: StPeteEvents@stpete.org

Review and check all conditions which apply to this event: Note the corresponding obligation for each condition.

Condition		Obligation
☐ Public Invited		General Liability Insurance
☐ Located in Park		Park Permit
☐ Vending Product / Merchandise Sales		Occupational License
☒ Vending Food / Beverage		Health Inspection
☐ Vendors / Exhibitors	How many?	
☐ Vending Beer / Wine		Alcohol Permit Additional insurance Required
☒ Erecting Tents - Larger than 10ft x 12ft	How many? 4	Temporary Structure Permit
☐ Fence Installation	What type?	Temporary Structure Permit
☒ Other Structures	What structure? Award Stands	Temporary Structure Permit
☐ Open Flame Food Preparation		Fire Inspection Permit
☐ Pyrotechnics		Fireworks Permit
☐ Require Street Closure		Parade or Street Closure Permit(s)
☐ VIP Area		
☒ Staging	☐ Professional ☐ Showmobile ☐ Other	
☒ Amplified Sound	☐ Performers ☒ Announcement Only	
☐ Security	☐ Daytime - Private ☐ Overnight - Private ☒ Event Time Frame - SPPD	
☒ Sanitary Facilities - Port-O-Lets	Regular Units 6 Disabled Units 2 Hand Washing	
☐ Off-site Parking / Shuttle		
☐ Semitruck / Tractor Trailer		

Marketing: Please check all that apply.

☐ Invitations	☒ Radio
☒ Posters / Flyers	☒ Television
☒ Newspaper / Internet	☐ Remote Broadcast

City logo should be used in any promotional materials, posters, flyers, ads, website, public service announcements, and press releases.

Electrical Requirements:

Does your event require any power needs using more than the standard 110/20amp located in the parks? ☐ YES ☒ NO

If YES, check all that apply. ☐ RV'S ☐ Coffee Vendors ☐ Ice Bins ☐ Freezers ☐ Ice Cream Vendors ☐ Catering Trucks ☐ Other:

Please explain the details of the above items checked. Tell us how much and what type of power they would require.

N/A

Will you supply your own generators? ☐ YES ☒ NO

Will your event have a licensed electrician on-site during the event? ☐ YES ☒ NO If YES, who?

Will your event be requesting any variances from City policies or procedures? If YES, please explain.

N/A

If City permits, licenses, or services are required for event, who will pay for them?

Name: Phone:

Address (including zip):

Type of music, # of stages, and # of bands.

1 Stages - for opening ceremonies and awards

List Vending Products. Name & Provider.

N/A

For Use of Beer/Wine - Please provide name, address and phone number of the sponsoring 501(c)3 or catering company.

N/A

Explain subject/purpose of all speeches/demonstrations which will occur.

We conduct and Olympic opening ceremonies for our athletes, including announcements, thank you's and a torch run.

Discuss your load in/load out parking needs, include times and dates.

N/A

Other Comments: Please describe your fee structure.

N/A

Other comments:

N/A

I represent and warrant that the purpose of the proposed activity/event and conduct of the sponsor(s) and the participants shall conform to all requirements of law and all ordinances of the State of Florida, Pinellas County, and the City of St. Petersburg including, but not limited to, City noise ordinances and Parks and Recreation Department Policies and Procedures. I acknowledge that failure to observe such laws, ordinances, or policies and procedures will result in an immediate cancellation of the event and all permits.

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Name: Cydni Weiner Title: County Director Date: 10/2/18

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LEISURE SERVICES
CO-SPONSORED EVENT
PROJECT COST SUMMARY

PROJECT #:	16541
EVENT:	Special Olympics Area Games
LOCATION:	Elva Rouse
EVENT DATE:	3/10/18

	AGENCY	DESCRIPTION	LABOR	BENEFITS	EQUIPMENT	MATERIAL	SERVICES	TOTAL
1:	150	FIRE						0.00
2:	190	PARKS						0.00
3:	140	POLICE						0.00
4:	190	RECREATION	9,478.51	766.94		999.24	80.00	11,324.69
5:	450	SANITATION						0.00
6:	400	STORMWATER						0.00
7:	130/281/400	TRAFFIC TRANSPORTATION						0.00
8:								0.00
9:								0.00
10:								0.00
	SUMMARY TOTALS		9,478.51	766.94	0.00	999.24	80.00	11,324.69

SALES TAX:	
AMOUNT TO BE INVOICED:	**11,324.69**

IN KIND AMOUNTS NOT BILLED

IN KIND SERVICES *	**231.49**

*Estimated cost of City services for which your co-sponsored event has not been charged. These in kind services were rendered by City staff in planning and preparation for your co-sponsored event.

IRS Department of the Treasury
Internal Revenue Service
P.O. Box 2508
Cincinnati OH 45201

In reply refer to: 0248167147
Oct. 01, 2012 LTR 4168C E0
23-7181560 000000 00
00016138
BODC: TE

SPECIAL OLYMPICS FLORIDA INC
1915 DON WICKHAM DR
CLERMONT FL 34711-1915

36628

Employer Identification Number: 23-7181560
Person to Contact: Ms Wittwer
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Sep. 20, 2012, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in June 1972.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

0248167147
Oct. 01, 2012 LTR 4168C E0
23-7181560 000000 00
00016139

SPECIAL OLYMPICS FLORIDA INC
1915 DON WICKHAM DR
CLERMONT FL 34711-1915

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,

Richard McKee

Richard McKee, Department Manager
Accounts Management Operations

Florida Department of State DIVISION OF CORPORATIONS

Department of State / Division of Corporations / Search Records / Detail By Document Number /

Detail by Entity Name

Florida Not For Profit Corporation
SPECIAL OLYMPICS FLORIDA, INC.

Filing Information

Document Number	722744
FEI/EIN Number	23-7181560
Date Filed	02/21/1972
State	FL
Status	ACTIVE
Last Event	AMENDMENT
Event Date Filed	05/17/2013
Event Effective Date	NONE

Principal Address

1915 DON WICKHAM DR.
CLERMONT, FL 34711

Changed: 05/24/2010

Mailing Address

1915 DON WICKHAM DR.
CLERMONT, FL 34711

Changed: 05/24/2010

Registered Agent Name & Address

WHEELOCK, SHERRY
1915 DON WICKHAM DR.
CLERMONT, FL 34711-1905

Name Changed: 08/13/2012

Address Changed: 03/15/2012

Officer/Director Detail

Name & Address

Title C

Giebler Millner, Dawn
450 South Orange Avenue
Suite 650
Orlando, FL 32801

Title S

Singh, Brad
1000 Universal Studios Plaza
Orlando, FL 32819

Title T

Harvey, Debbie
3850 S Banana River Blvd
Cocoa Beach, FL 32931

Title PCEO

WHEELOCK, SHERRY
1915 DON WICKHAM DR.
CLERMONT, FL 34711

Title Sr VP Community Relations

Amlie, Berit
1915 DON WICKHAM DRIVE
CLERMONT, FL 34711

Title Officer, Senior Regional VP, Resource Development

Kozlowski, Erin
1915 DON WICKHAM DR
Clermont, FL 34711

Annual Reports

Report Year	Filed Date
2017	07/05/2017
2018	03/20/2018
2018	08/30/2018

Document Images

08/30/2018 -- AMENDED ANNUAL REPORT	View image in PDF format
03/20/2018 -- ANNUAL REPORT	View image in PDF format
09/01/2017 -- AMENDED ANNUAL REPORT	View image in PDF format
07/05/2017 -- ANNUAL REPORT	View image in PDF format
09/13/2016 -- AMENDED ANNUAL REPORT	View image in PDF format
04/15/2016 -- ANNUAL REPORT	View image in PDF format
04/21/2015 -- AMENDED ANNUAL REPORT	View image in PDF format
01/29/2015 -- ANNUAL REPORT	View image in PDF format
08/08/2014 -- AMENDED ANNUAL REPORT	View image in PDF format
01/09/2014 -- ANNUAL REPORT	View image in PDF format
02/25/2013 -- ANNUAL REPORT	View image in PDF format
10/03/2012 -- ANNUAL REPORT	View image in PDF format
08/13/2012 -- ANNUAL REPORT	View image in PDF format

st.petersburg

Contract/Permit

Contract #: 25383
Date: 06 Nov 2018

User: JSBENNIN
Status: Firm

SPECIAL OLYMPICS PINELLAS COUNTY
CYDNI WEINER
2235 NE COACHMAN RD
CLEARWATER FL 33765 USA

Primary #: (813) 857-8685
Secondary #: (727)
Other #: ()

Purpose of Use: SPECIAL OLYMPICS FLORIDA

Expected: 1,000

Co-Sponsored Event

Contract Balance $60.00

Conditions of Use: Insurance Required

Other Information:

Use of beer and wine	No
Use of fencing	No
Use of liquor	No

Date(s) and Time(s) of Use: **Starting: Fri 29 Mar 19 12:00 am** **Ending: Sat 30 Mar 19 11:59 pm**

Facility/Equipment	Day	Date	Time	Fee	Extra Fee	Tax	Total
Special Programs	Fri	29 Mar 2019	12:00 AM	$0.00	$0.00	$0.00	$0.00
Special Event		30 Mar 2019	11:59 PM				

Additional Fees:

Extra Fee	Quantity	Charge	Tax	Total
Application Processing Fee - Parks	1	$30.00	$0.00	$30.00
Co-Sponsored Application Fee	1	$30.00	$0.00	$30.00
				$60.00

Charges:

Fees	Extra Fees	Tax	Total	Deposit	Total Applied	Contract Balance	Account Balance
$ 0.00	$60.00	$0.00	$60.00	$0.00	$0.00	$60.00	$60.00

Balance of rental due and payable immediately.

Payments:

Additional Notes:

I have read this Agreement and agree to comply with the terms and conditions set forth in this Agreement. I also understand this Agreement is not final until approved and executed by the Parks and Recreation Superintendent or designee.

By:(Sign Name) _____

(Print Name) **CYDNI WEINER**

SPECIAL OLYMPICS PINELLAS COUNTY
Name of User Organization, If Applicable

CITY OF ST. PETERSBURG, FLORIDA

By:(Sign Name): _____
Parks and Recreation Superintendent

(Print Name) _____
Parks and Recreation Department

_____
Supervisor II / Foreman

☐ Approved or ☐ Rejected Date: _____

_____
Manager

☐ Approved or ☐ Rejected Date: _____

st.petersburg

Contract/Permit

Contract #: 25383
Date: 06 Nov 2018

User: JSBENNIN
Status: Firm

_____ ☐ Approved or ☐ Rejected Date: _____
Manager

The Americans with Disabilities Act (A.D.A.) guarantees equal opportunity for people with disabilities. Special accommodation requests such as sign language interpreters, taped or Braille materials, assistive listening devices, etc., should be made at least one week prior to the activity or program. Individuals using TTD devices, please contact us using the Florida Relay Service at 800-955-8771.

CITY OF ST. PETERSBURG
PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENT APPLICATION

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st. petersburg parks & recreation

Date Received: 8-30-18
Check or Cash: 1080 / 1081
Application #: 77
Packet: B
Permit #: 25386

Event Title: St. Pete Veg Fest Phone No.: 727-489-4497 Fax No.:

Entity Name: Solutionary Events, Inc. Federal I.D. Number: 81-5273272

Event Date(s): March 30, 2019 Location: North Straub Park

Day 1 of Event: 3/30/2019 Time Gates Open: 10:00 a.m. Ending Time: 5:00 p.m.

Day 2 of Event: Time Gates Open: Ending Time:

Day 3 of Event: Time Gates Open: Ending Time:

Application Prepared by: Jenna Bardroff Phone: 941-730-4745

Title: Event Coordinator/Authorized Representative Cell Phone: 941-730-4745

Address: 433 Rotary Place NE City: St. Petersburg State: FL Zip: 33703

Email Address: organizers@solutionaryevents.com

Additional Contact Person: Carrie Burns Day Phone: 727-455-1354

What month/year were you incorporated as nonprofit? February, 2017

List all 501(c)3 entities that will benefit from this event. Solutionary Events, Inc.

Name of the for-profit entity?

Describe how this event will contribute to the quality of life in and enhance the image of St. Petersburg.

This planet is shared by all living beings, and we have just one Earth—we are all connected. St. Pete Veg Fest will raise awareness for many solutions to problems resulting in an unhealthy world, such as deforestation, water depletion, pollution, animal cruelty, preventable illnesses, and social injustices. Education and advocacy are the most powerful tools to enact positive, long-term and meaningful change. Instead of considering what might happen if we don't grasp the magnitude of protecting the planet now, we believe in considering what might happen if we create a regenerative world by making healthy lifestyle choices, one community at a time. The St. Petersburg community embraces many businesses and organizations who are working to reduce waste, make conscientious consumer choices, and celebrate sustainable living.

Describe what economic benefit and impact this event will bring to St. Petersburg.

Many local businesses and organizations will benefit from the event through increased exposure and product sales. The team and I are thrilled to be attending classes at The Greenhouse, where we have been meeting several new St. Pete entrepeneurs who have been seeking opportunities for getting the word out about their business. We hope for St. Pete Veg Fest to benefit new and established businesses throughout St. Petersburg.

Each co-sponsored entity must possess liability insurance naming the City of St. Petersburg as an additional insured and secure said insurance in the amount determined by the City.

Does your group presently have liability insurance? ☐ YES ☒ NO How much?

Are there plans to sell or distribute beer/wine at your event? ☐ YES ☒ NO

Will there be an admission / registration fee? ☐ YES ☒ NO Advanced Fee: Day of:

Please provide the website address for your event. http://www.stpetevegfest.org (under construction)

Please provide a phone number that can be advertised to the public. 727-489-4497

What is the estimated attendance for this event? Spectators 3,000 Participants 75 Last Year's Total Attendance N/A

Please check the equipment and/or facilities you are requesting.

Recreation Equipment

Showmobile (Yes/No)

Bleacher(s) needed. Each bleacher approx. 180 people)

Tables (6 ft) # needed Chairs # needed

Public Address System

# of portable risers needed (4 in. x 8 in. x 16 in. sections)

Special Events Facilities

- ☐ Mahaffey Theater
- ☐ Coliseum
- ☐ Sunken Gardens
- ☐ Boyd Hill

☐ Non-City Locations

Which Location?

North Straub Park

The following departments may provide and charge for additional services. You will be provided cost estimates in your Co-sponsored Agreement.

POLICE:	Public Safety Personnel, Marine Services
TRAFFIC:	Personnel, Equipment (cones, barricades, no parking signs)
FIRE:	Paramedics, Inspectors
PARKS SERVICES:	Cleanup Personnel, Dumpster(s), Trash Receptacles, Event Site Preparation and Restoration
RECREATION SERVICES:	On-site Presence, Logistics Help, Liaison with Other Ddepartments

Note: The City **does not provide tents, Port-O-Lets, or large quantities of tables and chairs.**

I certify that the event will be open to all citizens and that individuals will not be barred from participation due to race, creed, color, national origin, sex, age, or physical impairment. I understand that a financial report of the event is due in the Parks and Recreation office within 30 days of the completion of the event. I also understand that the City is to be shown as a co-sponsor on any promotional materials produced for the event. I agree to obtain the required liability insurance and to secure all necessary city/county/state permits/licenses. I further certify that the facts contained in this application are accurate.

Name:	Jenna Bardroff	Title:	Event Coordinator	Date:	8-23-18
Co-Sign:		Title:		Date:	

NOTE: a. **If person/entity preparing this application is not representing a nonprofit entity, the application must be co-signed by someone from a sponsoring nonprofit entity. A copy of the sponsoring entity's 501(c)3 designation must accompany this application.**

b. **If your entity has outstanding financial obligations with any department within the City of St. Petersburg, your application will not be processed until debt if paid.**

c. **Applications lacking information or the required completed appendixes listed below will not be processed.**

PLEASE ATTACH THE FOLLOWING

1. Route map for parade, run, walk, and/or bike event.
2. Site map of event and detail schedule of each day's events including open and close times.
3. Complete Appendix B and Appendix C.
4. Check for $30.00 for co-sponsored application processing (non-refundable).
5. Check for park permit fee. See Appendix A for fee structure.
6. A copy of 501(c)3 designation (if applicable)

FOR FURTHER INFORMATION, PLEASE CALL LYNN GORDON, PARKS & RECREATION MANAGER,
727-893-7766 or EMAIL: StPeteEvents@stpete.org

st.petersburg
www.stpete.org

PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENTS
SUMMARY SHEET

st. petersburg parks & recreation

Review and check all conditions which apply to this event: Note the corresponding obligation for each condition.

Condition		Obligation
[X] Public Invited		General Liability Insurance
[X] Located in Park		Park Permit
[ ] Vending Product / Merchandise Sales		Occupational License
[ ] Vending Food / Beverage		Health Inspection
[ ] Vendors / Exhibitors	How many? Over 30 Vendors / Exhibitors	
[ ] Vending Beer / Wine		Alcohol Permit Additional insurance Required
[X] Erecting Tents - Larger than 10ft x 12ft	How many? 2	Temporary Structure Permit
[ ] Fence Installation	What type?	Temporary Structure Permit
[ ] Other Structures	What structure?	Temporary Structure Permit
[ ] Open Flame Food Preparation		Fire Inspection Permit
[ ] Pyrotechnics		Fireworks Permit
[ ] Require Street Closure		Parade or Street Closure Permit(s)
[ ] VIP Area		
[ ] Staging	[ ] Professional [ ] Showmobile [ ] Other	
[X] Amplified Sound	[X] Performers [ ] Announcement Only	
[X] Security	[ ] Daytime - Private [X] Overnight - Private [ ] Event Time Frame - SPPD	
[X] Sanitary Facilities - Port-O-Lets	Regular Units 8 Disabled Units 3 Hand Washing 3	
[ ] Off-site Parking / Shuttle		
[ ] Semitruck / Tractor Trailer		

Marketing: Please check all that apply.

- [X] Invitations
- [X] Posters / Flyers
- [X] Newspaper / Internet
- [X] Radio
- [X] Television
- [ ] Remote Broadcast

City logo should be used in any promotional materials, posters, flyers, ads, website, public service announcements, and press releases.

Electrical Requirements:

Does your event require any power needs using more than the standard 110/20amp located in the parks? ☐ YES ☒ NO

If YES, check all that apply. ☐ RV'S ☐ Coffee Vendors ☐ Ice Bins ☐ Freezers ☐ Ice Cream Vendors ☐ Catering Trucks ☐ Other:

Please explain the details of the above items checked. Tell us how much and what type of power they would require.

Will you supply your own generators? ☒ YES ☐ NO

Will your event have a licensed electrician on-site during the event? ☐ YES ☒ NO If YES, who?

Will your event be requesting any variances from City policies or procedures? If YES, please explain.

If City permits, licenses, or services are required for event, who will pay for them?

Name: Jenna Bardroff/Solutionary Events Phone: 941-730-4745

Address (including zip): 433 Rotary Place NE, St. Petersburg, FL 33703

Type of music, # of stages, and # of bands.

Live bands playing background music, amplified/acoustic, 1 stage (10x15 tent on grass), 6 bands

List Vending Products. Name & Provider.

N/A

For Use of Beer/Wine - Please provide name, address and phone number of the sponsoring 501(c)3 or catering company.

N/A

Explain subject/purpose of all speeches/demonstrations which will occur.

All speeches will be intended to promote health and wellness, compassion for animals, social justice, and environmental sustainability. Topics will be non-religious and non-political.

Discuss your load in/load out parking needs, include times and dates.

Vendors will need to load in starting at 6:30 a.m. on Saturday, March 30 for food vendors. If possible, we would be interested in learning how to block off part of the metered parking area next to the park for food trucks. We would not require any street closures though. All other vendors will load in at 7:00 a.m. and we will have ~20 volunteers assigned to helping vendors unload, park, and return to setup their items. We would love to suggest any City recommendations for parking to vendors/guests. Load out will begin at 5:00 p.m. the same day.

Other Comments: Please describe your fee structure.

The festival would be free for the public to attend.

Other comments:

The City of St. Petersburg is currently co-sponsoring the St. Pete Health Fest on October 6 at Williams Park. It has been a pleasure working with the City for this event and we hope to continue promoting a healthy St. Petersburg community with St. Pete Veg Fest. Tampa Bay Veg Fest has been tremendously successful and has had an amazingly positive impact on the Tampa Bay community. Many people have asked us to coordinate a second Tampa Bay event in St. Petersburg and the coordinators of the Tampa Bay Veg Fest are happy to see that another festival is in the works. We look forward to the success of St. Pete Health Fest and we hope for the opportunity to continue working with the City of St. Petersburg!

I represent and warrant that the purpose of the proposed activity/event and conduct of the sponsor(s) and the participants shall conform to all requirements of law and all ordinances of the State of Florida, Pinellas County, and the City of St. Petersburg including, but not limited to, City noise ordinances and Parks and Recreation Department Policies and Procedures. I acknowledge that failure to observe such laws, ordinances, or policies and procedures will result in an immediate cancellation of the event and all permits.

WITHOUT LIMITING THE GENERALITY OF THE FOREGOING, I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE PARKS AND RECREATION DEPARTMENT POLICIES AND PROCEDURES PERTAINING TO THE USE OF PARKS AND THE PARK RULES SET FORTH IN ARTICLE II, CHAPTER 21, OF THE ST. PETERSBURG CITY CODE, INCLUDING BUT NOT LIMITED TO THE INDEMNIFICATION AND INSPECTION OBLIGATIONS ASSUMED BY ME AND THE PERSON OR ENTITY ON WHOSE BEHALF THIS APPLICATION IS BEING MADE.

I certify that the facts contained in this application are accurate.

Name: Jenna Bardroff Title: Event Coordinator Date: 08/23/2018

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www.stpete.org

Appendix B
President or CEO
Responsible Party Information

Please complete the information below for each responsible party.

Name of the Nonprofit Corporation: Solutionary Events, Inc.

Name of Responsible Party (President or CEO ONLY): Larry Rumbough

Title of Responsible Party: President

Physical Address of Responsible Party: 12472 Lake Underhill Road #227, Orlando, FL 32828

Phone Number of Responsible Party: 321-331-1859

Email Address of Responsible Party: organizers@solutionaryevents.com

Nonprofit (Employee Identification Number): 81-5273272

Name of the For-profit Corporation:

Name of Responsible Party (President or CEO ONLY):

Title of Responsible Party:

Physical Address of Responsible Party:

Phone Number of Responsible Party:

Email Address of Responsible Party:

For-profit (Employee Identification Number)

Please include a copy of the the current IRS Nonprofit Affidavit / For Profit

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APPENDIX C
STATEMENT OF REVENUE AND EXPENSES FORM
PRIOR YEAR'S EVENT
(Must be completed)

Name of Event: St. Pete Veg Fest
Date(s) of Event: 03/30/2019 - 03/30/2019

I. REVENUE SOURCES (attach sheet if more space is needed)

		Amount
1.	Vendors	$8,500
2.	Sponsors	$2,000
3.	Grants	$1,500
4		
5.		
6.		
7.		
8.		
	TOTAL GROSS REVENUE	$12,000

II. EXPENSES (attach sheet if more space is needed)

1.	Insurance	$350
2.	Marketing	$3,000
3.	Application Fee + Co-Sponsored Event Fee	$230
4	Port-o-lets	$2,100
5.	Tent, table, and chair rentals	$2,000
6.	Signs and banners	$500
7.	Materials for Kids Zone	$300
8.	Speaker travel expenses	$1,000
9.	Food demo supplies	$300
10.	Miscellaneous fees (e.g. waste disposal, etc)	$600
11.	Info guides	$1,500
12.		
	TOTAL OPERATING EXPENSES	$11,880
	TOTAL NET INCOME	$120

III. ALLOCATION OF NET INCOME (attach sheet if more space is needed)

1.	Solutions Events, Inc.	$120
2.		
3.		
4.		
5.		
6.		
	TOTAL ALLOCATION OF NET INCOME	$120

Prepared by: Jenna Bardroff Date: 08/23/2018

Print Application

Submit Application by Email

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: MAR 27 2017

SOLUTIONARY EVENTS INC
433 ROTARY PLACE NE
SAINT PETERSBURG, FL 33703-0000

Employer Identification Number:
81-5273272
DLN:
26053481002187
Contact Person:
CUSTOMER SERVICE ID# [illegible]
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
June 30
Public Charity Status:
170(b)(1)(A)(vi)
Form 990/990-EZ/990-N Required:
Yes
Effective Date of Exemption:
February 6, 2017
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We're pleased to tell you we determined you're exempt from federal income tax under Internal Revenue Code (IRC) Section 501(c)(3). Donors can deduct contributions they make to you under IRC Section 170. You're also qualified to receive tax deductible bequests, devises, transfers or gifts under Section 2055, 2106, or 2522. This letter could help resolve questions on your exempt status. Please keep it for your records.

Organizations exempt under IRC Section 501(c)(3) are further classified as either public charities or private foundations. We determined you're a public charity under the IRC Section listed at the top of this letter.

If we indicated at the top of this letter that you're required to file Form 990/990-EZ/990-N, our records show you're required to file an annual information return (Form 990 or Form 990-EZ) or electronic notice (Form 990-N, the e-Postcard). If you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked.

If we indicated at the top of this letter that an addendum applies, the enclosed addendum is an integral part of this letter.

For important information about your responsibilities as a tax-exempt organization, go to www.irs.gov/charities. Enter "4221-PC" in the search bar to view Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, which describes your recordkeeping, reporting, and disclosure requirements.

9000041 05/11/17

DR-14
R. 10/15

FLORIDA

Consumer's Certificate of Exemption

Issued Pursuant to Chapter 212, Florida Statutes

85-8017273589C-3	04/24/2017	04/30/2022	501(C)(3) CORPORATION
Certificate Number	Effective Date	Expiration Date	Exemption Category

This certifies that

SOLUTIONARY EVENTS INC
433 ROTARY PL NE
SAINT PETERSBURG FL 33703-1540

is exempt from the payment of Florida sales and use tax on real property rented, transient rental property rented, tangible personal property purchased or rented, or services purchased.

DR-14
R. 10/15

FLORIDA

Important Information for Exempt Organizations

1. You must provide all vendors and suppliers with an exemption certificate before making taxable purchases. See Rule 12A-1.038, Florida Administrative Code (F.A.C.).

2. Your *Consumer's Certificate of Exemption* is to be used solely by your organization for your organization's customary nonprofit activities.

3. Purchases made by an individual on behalf of the organization are taxable, even if the individual is reimbursed by the organization.

4. This exemption applies only to purchases your organization makes. The sale or lease to others of tangible personal property, sleeping accommodations, or other real property is taxable. Your organization must register and collect and remit sales and use tax on such taxable transactions. Note: Churches are exempt from this requirement except when they are the lessor of real property (Rule 12A-1.070, F.A.C.).

5. It is a criminal offense to fraudulently present this certificate to evade the payment of sales tax. Under no circumstances should this certificate be used for the personal benefit of any individual. Violators will be liable for payment of the sales tax plus a penalty of 200% of the tax, and may be subject to conviction of a third-degree felony. Any violation will require the revocation of this certificate.

6. If you have questions regarding your exemption certificate, please contact the Exemption Unit of Account Management at 800-352-3671. From the available options, select "Registration of Taxes," then "Registration Information," and finally "Exemption Certificates and Nonprofit Entities." The mailing address is PO Box 6480, Tallahassee, FL 32314-6480.

Florida Department of State DIVISION OF CORPORATIONS

Detail by Entity Name

Florida Not For Profit Corporation
SOLUTIONARY EVENTS INC

Filing Information

Document Number	N17000001349
FEI/EIN Number	81-5273272
Date Filed	02/06/2017
State	FL
Status	ACTIVE

Principal Address

433 ROTARY PLACE NE
ST. PETERSBURG, FL 33703

Mailing Address

P.O. Box 7463
St. Petersburg, FL 33734

Changed: 02/20/2018

Registered Agent Name & Address

BARDROFF, JENNA D
433 ROTARY PLACE NE
ST. PETERSBURG, FL 33703

Officer/Director Detail

Name & Address

Title P

RUMBOUGH, LARRY
840 LILAC TRACE LANE
ORLANDO, FL 32828

Title T, S

BARDROFF, THOMAS
8009 HIGH OAKS TRAIL
MYAKKA CITY, FL 34251

Title Director

Chin, Trevor

9808 Sir Frederick Street
Tampa, FL 33637

Title Authorized Representative

Bardroff, Jenna Delia
433 ROTARY PLACE NE
ST. PETERSBURG, FL 33703

Title Authorized Representative

Layton, Kevin Richard
433 ROTARY PLACE NE
ST. PETERSBURG, FL 33703

Title Authorized Representative

Brown, Brian William Edmund
433 ROTARY PLACE NE
ST. PETERSBURG, FL 33703

Title Authorized Representative

Baker, Kristen
433 ROTARY PLACE NE
ST. PETERSBURG, FL 33703

Annual Reports

Report Year	Filed Date
2018	02/20/2018

Document Images

02/20/2018 -- ANNUAL REPORT	View image in PDF format
02/06/2017 -- Domestic Non-Profit	View image in PDF format

st.petersburg

Contract/Permit

Contract #: 25386
Date: 06 Nov 2018

User: JSBENNIN
Status: Firm

SOLUTIONARY EVENTS INC
JENNA BARDROFF
433 ROTARY PL NE
ST PETERSBURG FL 33703 1540 USA

Primary #: (941) 730-4745
Secondary #: ()
Other #: ()

Purpose of Use: ST. PETE VEG FEST

Expected: 3,000

Co-Sponsored Event

Contract Balance $0.00

Conditions of Use: Insurance Required

Other Information:

Use of beer and wine	No
Use of fencing	No
Use of liquor	No

Date(s) and Time(s) of Use: **Starting: Fri 29 Mar 19 06:00 am** **Ending: Sat 30 Mar 19 09:00 pm**

Facility/Equipment	Day	Date	Time	Fee	Extra Fee	Tax	Total
North Straub Park	Fri	29 Mar 2019	06:00 AM	$0.00	$200.00	$0.00	$200.00
Park		30 Mar 2019	09:00 PM				

Additional Fees:

Extra Fee	Quantity	Charge	Tax	Total
Co-Sponsored Application Fee	1	$30.00	$0.00	$30.00
				$30.00

Extra Fee - Bookings	Hours	Quantity	Charge	Tax	Total
Co-Sponsored Permit Fee	39:00	1	$200.00	$0.00	$200.00
		1	$200.00	$0.00	$200.00

Charges:

Fees	Extra Fees	Tax	Total	Deposit	Total Applied	Contract Balance	Account Balance
$ 0.00	$230.00	$0.00	$230.00	$0.00	$230.00	$0.00	$0.00

Balance of rental due and payable immediately.

Payments:

Date	Amount	Payment Type	Reference	Receipt Number
06 Nov 2018	$30.00	Check	Rental	3188284
06 Nov 2018	$200.00	Check	Rental	3188285

Additional Notes:

I have read this Agreement and agree to comply with the terms and conditions set forth in this Agreement. I also understand this Agreement is not final until approved and executed by the Parks and Recreation Superintendent or designee.

By:(Sign Name) _____

(Print Name) **JENNA BARDROFF**

SOLUTIONARY EVENTS INC
Name of User Organization, If Applicable

CITY OF ST. PETERSBURG, FLORIDA

By:(Sign Name): _____
Parks and Recreation Superintendent

(Print Name) _____
Parks and Recreation Department

Supervisor II / Foreman	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:

The Americans with Disabilities Act (A.D.A.) guarantees equal opportunity for people with disabilities. Special accommodation requests such as sign language interpreters, taped or Braille materials, assistive listening devices, etc., should be made at least one week prior to the activity or program. Individuals using TTD devices, please contact us using the Florida Relay Service at 800-955-8771.

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City of St. Petersburg

SOLUTIONARY EVENTS INC
JENNA BARDROFF
433 ROTARY PL NE
ST PETERSBURG, FL 33703 1540 USA

Receipt #: 3188284
User: JSBENNIN
Issued: Tue 06 Nov 18 09:16 am

Description	Amount
Previous Balance	$230.00
Applied To: 25386 - ST. PETE VEG FEST North Straub Park - Park March 29, 2019 6:00 am to March 30, 2019 9:00 pm	$30.00
Payment: Check	($30.00)
Balance	$200.00

APPROVED REFUNDS ARE BY CHECK ONLY

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City of St. Petersburg

SOLUTIONARY EVENTS INC
JENNA BARDROFF
433 ROTARY PL NE
ST PETERSBURG, FL 33703 1540 USA

Receipt #: 3188285
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Previous Balance	$200.00
Applied To: 25386 - ST. PETE VEG FEST North Straub Park - Park March 29, 2019 6:00 am to March 30, 2019 9:00 pm	$200.00
Payment: Check	($200.00)
Balance	$0.00

APPROVED REFUNDS ARE BY CHECK ONLY

CITY OF ST. PETERSBURG
PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENT APPLICATION

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st. petersburg parks & recreation

Date Received: 11/1/18
Check or Cash: 1129 & 1130
Application #: 79
Packet: D
Permit #: 25338

Event Title: Good With Me Day Festival Phone No.: 727-424-1270 Fax No.: 727-592-1355

Entity Name: Good With Me Inc Federal I.D. Number: 46-0699089

Event Date(s): September 21, 2019 Location: Williams Park

Day 1 of Event: September 21 Time Gates Open: 10:00 AM Ending Time: 4:00 PM

Day 2 of Event: Time Gates Open: Ending Time:

Day 3 of Event: Time Gates Open: Ending Time:

Application Prepared by: Patricia Noll Phone: 727-424-1270

Title: Founder/President Cell Phone: 727-424-1270

Address: 2628 5th Avenue North City: St. Petersburg State: FL Zip: 33713

Email Address: patricia@goodwithme.com

Additional Contact Person: Day Phone:

What month/year were you incorporated as nonprofit? N/A

List all 501(c)3 entities that will benefit from this event. Nomad Art Bus; Jump4Kids; Giving Tree Music

Name of the for-profit entity? Good With Me inc

Describe your event with details.

It is a celebration of every citizen in our community. The theme is "You don't have to put your life at risk to have fun." It's mission is to teach all people, especially those who are falling through the cracks and "dropping out", that they have value and to be able to recognize it within themselves.

Describe what economic benefit and impact this event will bring to St. Petersburg.

Reduced substance abuse & dependency, anger with self & others, disrupted school & work experience, & trouble with the law. Increased respect for self leading to increased respect for others, community mental & physical health , community participation & cohesion.

Each co-sponsored entity must possess liability insurance naming the City of St. Petersburg as an additional insured and secure said insurance in the amount determined by the City.

Does your group presently have liability insurance? ☐ YES ☒ NO How much?

Are there plans to sell or distribute beer/wine at your event? ☐ YES ☒ NO

Will there be an admission / registration fee? ☐ YES ☒ NO Advanced Fee: Day of:

Please provide the website address for your event. www.goodwithme.com/festival

Please provide a phone number that can be advertised to the public. 727-424-1270

What is the estimated attendance for this event? Spectators 400-600 Participants 75-100 Last Year's Total Attendance 400-450

Please check the equipment and/or facilities you are requesting.

Recreation Equipment

Showmobile (Yes/No) No

Bleacher(s) needed. Each bleacher approx. 180 people) 0

Tables (6 ft) # needed 20 Chairs # needed 40

Public Address System No

# of portable risers needed (4 in. x 8 in. x 16 in. sections) 0

Special Events Facilities

- ☐ Mahaffey Theater
- ☐ Coliseum
- ☐ Sunken Gardens
- ☐ Boyd Hill

☐ Non-City Locations

Which Location?

Williams Park

The following departments may provide and charge for additional services. You will be provided cost estimates in your Co-sponsored Agreement.

POLICE:	Public Safety Personnel, Marine Services
TRAFFIC:	Personnel, Equipment (cones, barricades, no parking signs)
FIRE:	Paramedics, Inspectors
PARKS SERVICES:	Cleanup Personnel, Dumpster(s), Trash Receptacles, Event Site Preparation and Restoration
RECREATION SERVICES:	On-site Presence, Logistics Help, Liaison with Other Ddepartments

Note: The City does not provide tents, Port-O-Lets, or large quantities of tables and chairs.

I certify that the event will be open to all citizens and that individuals will not be barred from participation due to race, creed, color, national origin, sex, age, or physical impairment. I understand that a financial report of the event is due in the Parks and Recreation office within 30 days of the completion of the event. I also understand that the City is to be shown as a co-sponsor on any promotional materials produced for the event. I agree to obtain the required liability insurance and to secure all necessary city/county/state permits/licenses. I further certify that the facts contained in this application are accurate.

Name:	Pete Noll	Title:	Founder/President	Date:	10-28-2018
Co-Sign:		Title:		Date:	

NOTE: a. **If person/entity preparing this application is not representing a nonprofit entity, the application must be co-signed by someone from a sponsoring nonprofit entity. A copy of the sponsoring entity's 501(c)3 designation must accompany this application.**

b. **If your entity has outstanding financial obligations with any department within the City of St. Petersburg, your application will not be processed until debt if paid.**

c. **Applications lacking information or the required completed appendixes listed below will not be processed.**

PLEASE ATTACH THE FOLLOWING

1. Route map for parade, run, walk, and/or bike event.
2. Site map of event and detail schedule of each day's events including open and close times.
3. Complete Appendix B and Appendix C.
4. Check for $30.00 for co-sponsored application processing (non-refundable).
5. Check for park permit fee. See Appendix A for fee structure.
6. A copy of 501(c)3 designation (if applicable)

FOR FURTHER INFORMATION, PLEASE CALL LYNN GORDON, PARKS & RECREATION MANAGER, 727-893-7766 or EMAIL: StPeteEvents@stpete.org

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www.stpete.org

PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENTS
SUMMARY SHEET

st. petersburg parks & recreation

Review and check all conditions which apply to this event: Note the corresponding obligation for each condition.

Condition		Obligation
☒ Public Invited		General Liability Insurance
☒ Located in Park		Park Permit
☒ Vending Product / Merchandise Sales		Occupational License
☒ Vending Food / Beverage		Health Inspection
☒ Vendors / Exhibitors	How many? 40-50	
☐ Vending Beer / Wine		Alcohol Permit Additional insurance Required
☐ Erecting Tents - Larger than 10ft x 12ft	How many?	Temporary Structure Permit
☐ Fence Installation	What type?	Temporary Structure Permit
☐ Other Structures	What structure?	Temporary Structure Permit
☐ Open Flame Food Preparation		Fire Inspection Permit
☐ Pyrotechnics		Fireworks Permit
☐ Require Street Closure		Parade or Street Closure Permit(s)
☐ VIP Area		
☒ Staging	☐ Professional ☐ Showmobile ☐ Other	
☒ Amplified Sound	☐ Performers ☐ Announcement Only	
☐ Security	☐ Daytime - Private ☐ Overnight - Private ☐ Event Time Frame - SPPD	
☐ Sanitary Facilities - Port-O-Lets	Regular Units ____ Disabled Units ____ Hand Washing ____	
☒ Off-site Parking / Shuttle		
☐ Semitruck / Tractor Trailer		

Marketing: Please check all that apply.

☒ Invitations	☒ Radio
☒ Posters / Flyers	☒ Television
☒ Newspaper / Internet	☐ Remote Broadcast

City logo should be used in any promotional materials, posters, flyers, ads, website, public service announcements, and press releases.

Electrical Requirements:

Does your event require any power needs using more than the standard 110/20amp located in the parks? ☐ YES ☒ NO

If YES, check all that apply. ☐ RV'S ☒ Coffee Vendors ☐ Ice Bins ☐ Freezers ☒ Ice Cream Vendors ☒ Catering Trucks

☐ Other:

Please explain the details of the above items checked. Tell us how much and what type of power they would require.

Vendors offering healthy foods, snacks, juices, waters, etc.

Will you supply your own generators? ☐ YES ☒ NO

Will your event have a licensed electrician on-site during the event? ☐ YES ☒ NO If YES, who?

Will your event be requesting any variances from City policies or procedures? If YES, please explain.

No.

If City permits, licenses, or services are required for event, who will pay for them?

Name: Good With Me Inc Phone: 727-424-1270

Address (including zip): 2628 5th Avenue North, St. Petersburg, FL 33713

Type of music, # of stages, and # of bands.

Up-beat, Fun & Light throughout event.

List Vending Products. Name & Provider.

Healthy foods, juices, waters, smoothies, ice creams, popsicles
Essential Oils, Books, Art,
Crystals, Salt Rock Lamps, Sun Hats
Fitness clothing & shoes, Workout wear, T-Shirts

For Use of Beer/Wine - Please provide name, address and phone number of the sponsoring 501(c)3 or catering company.

Explain subject/purpose of all speeches/demonstrations which will occur.

Welcome, Explanation of Purpose of Good With Me Day Festival, Celebration of our city's citizens & their value.

Discuss your load in/load out parking needs, include times and dates.

Free Parking in City Parking Lot for Vendors 8AM - 4PM

Other Comments: Please describe your fee structure.

Vendor Fee where applicable $75

Other comments:

This is the 6th Annual Good With Me Day Event and the 2nd Annual Good With Me Day Festival. All feedback from last year's event was all positive from both vendors and attendees.
Good With Me Day is September 21 of each year in our city by official mayoral proclamation.
The purpose of the GWM Day Festival is to introduce more of our citizens to the Good With Me message that encourages all citizens to celebrate themselves in recognition of their worthiness & realize that they don't have to put their lives at risk to have fun.
The day's festivities provide examples of healthy & fun activities. The GWM Day Humanitarian Movement was recognized in more than 10 countries in 2018. The GWM Community Leader Program began in 2018. Submission is being made to the Chase Calendar of Events for recognition as an official Holiday in 2019. My work has received endorsements from internationally renowned authors, TV personalities, & speakers Deepak Chopra, Jacquelyn Small, Dr. Larry Dossey, & Jack Kornfield.
The mission of GWM Global Humanitarian Movement is "to teach people around the world how to feel good about themselves."

I represent and warrant that the purpose of the proposed activity/event and conduct of the sponsor(s) and the participants shall conform to all requirements of law and all ordinances of the State of Florida, Pinellas County, and the City of St. Petersburg including, but not limited to, City noise ordinances and Parks and Recreation Department Policies and Procedures. I acknowledge that failure to observe such laws, ordinances, or policies and procedures will result in an immediate cancellation of the event and all permits.

WITHOUT LIMITING THE GENERALITY OF THE FOREGOING, I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE PARKS AND RECREATION DEPARTMENT POLICIES AND PROCEDURES PERTAINING TO THE USE OF PARKS AND THE PARK RULES SET FORTH IN ARTICLE II, CHAPTER 21, OF THE ST. PETERSBURG CITY CODE, INCLUDING BUT NOT LIMITED TO THE INDEMNIFICATION AND INSPECTION OBLIGATIONS ASSUMED BY ME AND THE PERSON OR ENTITY ON WHOSE BEHALF THIS APPLICATION IS BEING MADE.

I certify that the facts contained in this application are accurate.

Name: Patti Noel Title: Founder/President Date: 10-28-2018

Appendix A

Co-Sponsored Event Park Fee Structure

* Events in Vinoy Park will be assessed $300.00 per event day (e.g.,1 day event = $300.00, 2 days = $600.00, 3 days or more = $900.00.) This includes the $30.00 park permit fee.

* Events in any other park will be assessed $200.00 per event day (e.g., 1 day event = $200.00, 2 days = $400.00, 3 or more days = $600.00). This includes the $30.00 park permit fee.

* The above fees will be due at the time you submit your application plus the $30.00 co-sponsored application fee.

* All co-sponsored event applications must be submitted at least 6 month prior to the event.

* Any application for a co-sponsored event submitted inside the six (6) month time frame will be assessed a non refundable $1,200.00 late fee.

* **The City requires payment in advance for all City services estimated and/or provided for first time events and one of a kind nonrecurring events.**

* **Payment will be required at least ten (10) business days prior to the start of the event and shall be in the form of cash, certified check, or an irrevocable bank letter of credit.**

* **All first time entities requesting events will be required to complete a credit application.**

Appendix B
President or CEO
Responsible Party Information

Please complete the information below for each responsible party.

Name of the **Nonprofit** Corporation: Nomad Art Bus Project

Name of Responsible Party (President or CEO ONLY): Carrie Boucher

Title of Responsible Party: Founding Artist & Executive Director

Physical Address of Responsible Party: PO Box 762, St. Petersburg, FL 33731

Phone Number of Responsible Party: 312-545-7441

Email Address of Responsible Party: carrie@nomadartbus.org

Nonprofit (Employee Identification Number):

Name of the **For-profit** Corporation: Good With Me Inc

Name of Responsible Party (President or CEO ONLY): Patricia Noll

Title of Responsible Party: Founder & President

Physical Address of Responsible Party: 2628 5th Avenue North, St. Petersburg, FL 33713

Phone Number of Responsible Party: 727-424-1270

Email Address of Responsible Party: patricia@goodwithme.com

For-profit (Employee Identification Number) 46-0699089

Please include a copy of the the current IRS Nonprofit Affidavit / For Profit

What method of invoicing would your organization prefer?

☒ BY Mail

Contact Name: Patricia Noll

Address: 235 3rd Avenue North, Unit 319

City, State, Zip: St. Petersburg, FL 33701

☐ BY EMAIL

Email Address:

APPENDIX C
STATEMENT OF REVENUE AND EXPENSES FORM
PRIOR YEAR'S EVENT
(Must be completed)

Name of Event: Good With Me Day Festival
Date(s) of Event: September 15, 201 -

I. REVENUE SOURCES (attach sheet if more space is needed)

		Amount
1.	Private Donor	$1,000.00
2.	Private Donor	$150.00
3.	Good With Me Inc	$5,704.04
4		
5.		
6.		
7.		
8.		
	TOTAL GROSS REVENUE	$6,854.04

II. EXPENSES (attach sheet if more space is needed)

1.	Nimesh Patel Empty Hands Music Travel ($1250) & Lodging (The Inn on Third $158.20)	$1,408.20
2.	Nomad Art Bus Project	$1,200.00
3.	Giving Tree Music	$500.00
4	Finesse Graphics	$930.90
5.	RickVisuals Photography	$425.00
6.	Fearless Mobile Rock Climbing	$600.00
7.	Swag Bags for Friends Without Homes	$250.00
8.	Canopy Tents	$376.90
9.	Guitar Center Sound Equipment Rental	$347.75
10.	The Event Helper Insurance	$298.37
11.	Miscellaneous Table Coverings, Chalk, Paints, Brushes, Rocks, Raffle, Clip Boards, Paper Gds	$286.92
12.	City of St. Petersburg	$230.00
	TOTAL OPERATING EXPENSES	$6,854.04
	TOTAL NET INCOME	$0.00

III. ALLOCATION OF NET INCOME (attach sheet if more space is needed)

1.		
2.		
3.		
4.		
5.		
6.		
	TOTAL ALLOCATION OF NET INCOME	

Prepared by: Patricia Noll Date: 10-28-2018

Florida Department of State DIVISION OF CORPORATIONS

Department of State / Division of Corporations / Search Records / Detail By Document Number /

Detail by Entity Name

Florida Profit Corporation
GOOD WITH ME, INC.

Filing Information

Document Number	P12000068330
FEI/EIN Number	46-0699089
Date Filed	08/06/2012
State	FL
Status	ACTIVE

Principal Address

2628 5th Avenue North
St. Petersburg, FL 33713

Changed: 04/26/2016

Mailing Address

235 3rd Avenue North
#319
St. Petersburg, FL 33701

Changed: 04/26/2016

Registered Agent Name & Address

NOLL, PATRICIA
235 3rd Avenue North
#319
St. Petersburg, FL 33701

Address Changed: 04/26/2016

Officer/Director Detail

Name & Address

Title P

NOLL, PATRICIA
235 3rd Avenue North
#319
St. Petersburg, FL 33701

Annual Reports

Report Year	Filed Date

2016	04/26/2016
2017	04/27/2017
2018	04/15/2018

Document Images

04/15/2018 -- ANNUAL REPORT	View image in PDF format
04/27/2017 -- ANNUAL REPORT	View image in PDF format
04/26/2016 -- ANNUAL REPORT	View image in PDF format
04/28/2015 -- ANNUAL REPORT	View image in PDF format
04/27/2014 -- ANNUAL REPORT	View image in PDF format
04/29/2013 -- ANNUAL REPORT	View image in PDF format
08/06/2012 -- Domestic Profit	View image in PDF format

Florida Department of State, Division of Corporations

Florida Department of State DIVISION OF CORPORATIONS

Department of State / Division of Corporations / Search Records / Detail By Document Number /

Detail by Entity Name

Florida Not For Profit Corporation
NOMADSTUDIO, INC.

Filing Information

Document Number	N13000010973
FEI/EIN Number	46-4322352
Date Filed	12/09/2013
State	FL
Status	ACTIVE

Principal Address

12211 Walsingham Rd
Largo, FL 33778

Changed: 03/09/2018

Mailing Address

P.O. Box 782
St. Petersburg, FL 33731

Changed: 04/24/2015

Registered Agent Name & Address

BOUCHER, CAROLYN P
12211 Walsingham Rd
Largo, FL 33778

Address Changed: 03/09/2018

Officer/Director Detail

Name & Address

Title PD

CURRAN, LESLIE
P.O. Box 782
St. Petersburg, FL 33731

Title TD

Rutishauser, Daniel S
P.O. Box 782
St. Petersburg, FL 33731

Title Secretary

FOUST, CHRISTY
P.O. Box 782
St. Petersburg, FL 33731

Title Director at Large

Keogh, Timothy
P.O. Box 782
St. Petersburg, FL 33731

Title EXECUTIVE DIRECTOR

BOUCHER, CAROLYN P
PO Box 782
St Petersburg, FL 33731

Annual Reports

Report Year	Filed Date
2016	03/12/2016
2017	02/01/2017
2018	03/09/2018

Document Images

03/09/2018 -- ANNUAL REPORT	View image in PDF format
02/01/2017 -- ANNUAL REPORT	View image in PDF format
03/12/2016 -- ANNUAL REPORT	View image in PDF format
04/24/2015 -- ANNUAL REPORT	View image in PDF format
02/10/2014 -- ANNUAL REPORT	View image in PDF format
12/09/2013 -- Domestic Non-Profit	View image in PDF format

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Contract/Permit

Contract #: 25388
Date: 06 Nov 2018

User: JSBENNIN
Status: Firm

GOOD WITH ME INC
PATRICA NOLL
2628 5TH AVE N
ST PETERSBURG FL 33713 USA

Primary #: (727) 424-1270
Secondary #: (727)
Other #: ()

Purpose of Use: GOOD WITH ME DAY FESTIVAL

Expected: 1,000

Co-Sponsored Event

Contract Balance $0.00

Conditions of Use: Insurance Required

Other Information:

Use of beer and wine	No
Use of fencing	No
Use of liquor	No

Date(s) and Time(s) of Use: **Starting: Fri 20 Sep 19 06:00 am** **Ending: Sat 21 Sep 19 09:00 pm**

Facility/Equipment	Day	Date	Time	Fee	Extra Fee	Tax	Total
Williams Park	Fri	20 Sep 2019	06:00 AM	$0.00	$200.00	$0.00	$200.00
Park		21 Sep 2019	09:00 PM				

Additional Fees:

Extra Fee	Quantity	Charge	Tax	Total
Co-Sponsored Application Fee	1	$30.00	$0.00	$30.00
				$30.00

Extra Fee - Bookings	Hours	Quantity	Charge	Tax	Total
Co-Sponsored Permit Fee	39:00	1	$200.00	$0.00	$200.00
		1	$200.00	$0.00	$200.00

Charges:

Fees	Extra Fees	Tax	Total	Deposit	Total Applied	Contract Balance	Account Balance
$ 0.00	$230.00	$0.00	$230.00	$0.00	$230.00	$0.00	$0.00

Balance of rental due and payable immediately.

Payments:

Date	Amount	Payment Type	Reference	Receipt Number
06 Nov 2018	$30.00	Check	Rental	3188295
06 Nov 2018	$200.00	Check	Rental	3188296

Additional Notes:

I have read this Agreement and agree to comply with the terms and conditions set forth in this Agreement. I also understand this Agreement is not final until approved and executed by the Parks and Recreation Superintendent or designee.

By:(Sign Name) _____

(Print Name) **PATRICA NOLL**

GOOD WITH ME INC
Name of User Organization, If Applicable

CITY OF ST. PETERSBURG, FLORIDA

By:(Sign Name): _____
Parks and Recreation Superintendent

(Print Name) _____
Parks and Recreation Department

Contract #: 25388
Date: 06 Nov 2018

User: JSBENNIN
Status: Firm

Supervisor II / Foreman	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:

The Americans with Disabilities Act (A.D.A.) guarantees equal opportunity for people with disabilities. Special accommodation requests such as sign language interpreters, taped or Braille materials, assistive listening devices, etc., should be made at least one week prior to the activity or program. Individuals using TTD devices, please contact us using the Florida Relay Service at 800-955-8771.

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City of St. Petersburg

GOOD WITH ME INC
PATRICA NOLL
2628 5TH AVE N
ST PETERSBURG, FL 33713 USA

Receipt #: 3188295
User: JSBENNIN
Issued: Tue 06 Nov 18 09:34 am

Description	Amount
Previous Balance	$230.00
Applied To: 25388 - GOOD WITH ME DAY FESTIVAL Williams Park - Park September 20, 2019 6:00 am to September 21, 2019 9:00 pm	$30.00
Payment: Check	($30.00)
Balance	$200.00

APPROVED REFUNDS ARE BY CHECK ONLY

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City of St. Petersburg

GOOD WITH ME INC
PATRICA NOLL
2628 5TH AVE N
ST PETERSBURG, FL 33713 USA

Receipt #: 3188296
User: JSBENNIN
Issued: Tue 06 Nov 18 09:34 am

Description	Amount
Previous Balance	$200.00
Applied To: 25388 - GOOD WITH ME DAY FESTIVAL Williams Park - Park September 20, 2019 6:00 am to September 21, 2019 9:00 pm	$200.00
Payment: Check	($200.00)
Balance	$0.00

APPROVED REFUNDS ARE BY CHECK ONLY

CITY OF ST. PETERSBURG
PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENT APPLICATION

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Date Received: 11-5-18
Check or Cash: 130580
Application #: 80
Packet: C
Permit #: 25389

Event Title: St Pete Pride Weekend
Phone No.: 727-342-0064 Fax No.:
Entity Name: St Pete Pride, Inc.
Federal I.D. Number:
Event Date(s): June 22nd - 23rd, 2019
Location: N. Straub Park & Bayshore Dr. Sclne

Day 1 of Event:	June 22	Time Gates Open:	1700	Ending Time:	2300
Day 2 of Event:	June 23	Time Gates Open:	1100	Ending Time:	1700
Day 3 of Event:		Time Gates Open:		Ending Time:	

Application Prepared by: Luke Blankenship
Phone: 813-751-7037
Title: Executive Director
Cell Phone: 813-751-7037
Address: Po Box 12647
City: St. Petersburg
State: FL
Zip: 33733
Email Address: Luke@StPetePride.com
Additional Contact Person: Stanley Solomons
Day Phone: 727-492-0895
What month/year were you incorporated as nonprofit? March, 2003
List all 501(c)3 entities that will benefit from this event. Suncoast Hospice, Metro Wellness, St Pete Pride
Name of the for-profit entity? N/A

Describe your event with details.

The event strengthens St. Pete's image as a welcoming city to all its visitors & residents on an international level, drawing on guests from around the world & highlighting the city of St. Pete & Pinellas County.

Describe what economic benefit and impact this event will bring to St. Petersburg.

Attracts national & international visitors, encourages relocations, hotel & restaurant revenue, encourages new business relocations.

Each co-sponsored entity must possess liability insurance naming the City of St. Petersburg as an additional insured and secure said insurance in the amount determined by the City.

Does your group presently have liability insurance? ☒ YES ☐ NO How much? 2,000,000
Are there plans to sell or distribute beer/wine at your event? ☒ YES ☐ NO
Will there be an admission / registration fee? ☐ YES ☒ NO Advanced Fee: Day of:
Please provide the website address for your event. www.StPetePride.com
Please provide a phone number that can be advertised to the public. 727-342-0064
What is the estimated attendance for this event? Spectators 50,000 Participants 400 Last Year's Total Attendance 50,000

Please check the equipment and/or facilities you are requesting.

Recreation Equipment

Showmobile (Yes/No) No

Bleacher(s) needed. Each bleacher approx. 180 people) 3

Tables (6 ft) # needed – Chairs # needed –

Public Address System –

# of portable risers needed (4 in. x 8 in. x 16 in. sections) –

Special Events Facilities

- ☐ Mahaffey Theater
- ☐ Coliseum
- ☐ Sunken Gardens
- ☐ Boyd Hill

☐ Non-City Locations

Which Location?

The following departments may provide and charge for additional services. You will be provided cost estimates in your Co-sponsored Agreement.

POLICE:	Public Safety Personnel, Marine Services
TRAFFIC:	Personnel, Equipment (cones, barricades, no parking signs)
FIRE:	Paramedics, Inspectors
PARKS SERVICES:	Cleanup Personnel, Dumpster(s), Trash Receptacles, Event Site Preparation and Restoration
RECREATION SERVICES:	On-site Presence, Logistics Help, Liaison with Other Ddepartments

Note: The City does not provide tents, Port-O-Lets, or large quantities of tables and chairs.

I certify that the event will be open to all citizens and that individuals will not be barred from participation due to race, creed, color, national origin, sex, age, or physical impairment. I understand that a financial report of the event is due in the Parks and Recreation office within 30 days of the completion of the event. I also understand that the City is to be shown as a co-sponsor on any promotional materials produced for the event. I agree to obtain the required liability insurance and to secure all necessary city/county/state permits/licenses. I further certify that the facts contained in this application are accurate.

Name:	[signature]	Title:	Executive Director	Date:	11-5-18
Co-Sign:	[signature]	Title:	Treasurer	Date:	11-5-18

NOTE:
a. **If person/entity preparing this application is not representing a nonprofit entity, the application must be co-signed by someone from a sponsoring nonprofit entity. A copy of the sponsoring entity's 501(c)3 designation must accompany this application.**
b. **If your entity has outstanding financial obligations with any department within the City of St. Petersburg, your application will not be processed until debt if paid.**
c. **Applications lacking information or the required completed appendixes listed below will not be processed.**

PLEASE ATTACH THE FOLLOWING

1. Route map for parade, run, walk, and/or bike event.
2. Site map of event and detail schedule of each day's events including open and close times.
3. Complete Appendix B and Appendix C.
4. Check for $30.00 for co-sponsored application processing (non-refundable).
5. Check for park permit fee. See Appendix A for fee structure.
6. A copy of 501(c)3 designation (if applicable)

FOR FURTHER INFORMATION, PLEASE CALL LYNN GORDON, PARKS & RECREATION MANAGER, 727-893-7766 or EMAIL: StPeteEvents@stpete.org

PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENTS
SUMMARY SHEET

Review and check all conditions which apply to this event: Note the corresponding obligation for each condition.

Condition		Obligation
[X] Public Invited		General Liability Insurance
[X] Located in Park		Park Permit
[X] Vending Product / Merchandise Sales		Occupational License
[X] Vending Food / Beverage		Health Inspection
[X] Vendors / Exhibitors	How many? over 30 vendors/Exhibitors	
[X] ~~Vending Beer / Wine~~		~~Alcohol Permit Additional insurance Required~~
[X] Erecting Tents - Larger than 10ft x 12ft	How many? 1	Temporary Structure Permit
[X] Fence Installation	What type?	Temporary Structure Permit
[ ] Other Structures	What structure?	Temporary Structure Permit
[ ] Open Flame Food Preparation		Fire Inspection Permit
[ ] Pyrotechnics		Fireworks Permit
[X] Require Street Closure		Parade or Street Closure Permit(s)
[ ] VIP Area		
[X] Staging	[X] Professional [ ] Showmobile [ ] Other	
[X] Amplified Sound	[X] Performers [ ] Announcement Only	
[X] Security	[ ] Daytime - Private [X] Overnight - Private [X] Event Time Frame - SPPD	
[X] Sanitary Facilities - Port-O-Lets	Regular Units 148 Disabled Units 8 Hand Washing 9	
[ ] Off-site Parking / Shuttle		
[ ] Semitruck / Tractor Trailer		

Marketing: Please check all that apply.

- [X] Invitations
- [X] Posters / Flyers
- [X] Newspaper / Internet
- [X] Radio
- [X] Television
- [X] Remote Broadcast

City logo should be used in any promotional materials, posters, flyers, ads, website, public service announcements, and press releases.

Electrical Requirements:

Does your event require any power needs using more than the standard 110/20amp located in the parks? ☐ YES ☒ NO

If YES, check all that apply. ☐ RV'S ☐ Coffee Vendors ☐ Ice Bins ☐ Freezers ☐ Ice Cream Vendors ☐ Catering Trucks ☐ Other:

Please explain the details of the above items checked. Tell us how much and what type of power they would require.

Will you supply your own generators? ☐ YES ☒ NO

Will your event have a licensed electrician on-site during the event? ☐ YES ☐ NO If YES, who?

Will your event be requesting any variances from City policies or procedures? If YES, please explain.

If City permits, licenses, or services are required for event, who will pay for them?

Name: St Pete Pride, Inc. Phone: 727-342-0084

Address (including zip): Po Box 12647, St. Petersburg, Fl, 33733

Type of music, # of stages, and # of bands.

Generic music, one Stage, up to 10 Bands

List Vending Products. Name & Provider.

Various

For Use of Beer/Wine - Please provide name, address and phone number of the sponsoring 501(c)3 or catering company.

Self

Explain subject/purpose of all speeches/demonstrations which will occur.

Festival - Celebration of diversity within the LGBTQI community

Discuss your load in/load out parking needs, include times and dates.

Festival - load-in / set up TBD, one hour prior to event time

Other Comments: Please describe your fee structure.

$ 100 to $ 500 based on exhibitor classification

Other comments:

I represent and warrant that the purpose of the proposed activity/event and conduct of the sponsor(s) and the participants shall conform to all requirements of law and all ordinances of the State of Florida, Pinellas County, and the City of St. Petersburg including, but not limited to, City noise ordinances and Parks and Recreation Department Policies and Procedures. I acknowledge that failure to observe such laws, ordinances, or policies and procedures will result in an immediate cancellation of the event and all permits.

WITHOUT LIMITING THE GENERALITY OF THE FOREGOING, I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE PARKS AND RECREATION DEPARTMENT POLICIES AND PROCEDURES PERTAINING TO THE USE OF PARKS AND THE PARK RULES SET FORTH IN ARTICLE II, CHAPTER 21, OF THE ST. PETERSBURG CITY CODE, INCLUDING BUT NOT LIMITED TO THE INDEMNIFICATION AND INSPECTION OBLIGATIONS ASSUMED BY ME AND THE PERSON OR ENTITY ON WHOSE BEHALF THIS APPLICATION IS BEING MADE.

I certify that the facts contained in this application are accurate.

Name: Luke Blankenship Title: Executive Director Date: 11-5-18

Appendix A

Co-Sponsored Event Park Fee Structure

* Events in Vinoy Park will be assessed $300.00 per event day (e.g.,1 day event = $300.00, 2 days = $600.00, 3 days or more = $900.00.) This includes the $30.00 park permit fee.

* Events in any other park will be assessed $200.00 per event day (e.g., 1 day event = $200.00, 2 days = $400.00, 3 or more days = $600.00). This includes the $30.00 park permit fee.

* The above fees will be due at the time you submit your application plus the $30.00 co-sponsored application fee.

* All co-sponsored event applications must be submitted at least 6 month prior to the event.

* Any application for a co-sponsored event submitted inside the six (6) month time frame will be assessed a non refundable $1,200.00 late fee.

* **The City requires payment in advance for all City services estimated and/or provided for first time events and one of a kind nonrecurring events.**

* **Payment will be required at least ten (10) business days prior to the start of the event and shall be in the form of cash, certified check, or an irrevocable bank letter of credit.**

* **All first time entities requesting events will be required to complete a credit application.**

Appendix B
President or CEO
Responsible Party Information

Please complete the information below for each responsible party.

Name of the **Nonprofit** Corporation: St Pete Pride, Inc.

Name of Responsible Party (President or CEO ONLY): Luke Blankenship

Title of Responsible Party: Executive Director

Physical Address of Responsible Party: 11401 Dr. M.L.K. Jr. St. N. Apt. 1015 St. Pete, FL, 33716

Phone Number of Responsible Party: 727-342-0084

Email Address of Responsible Party: Luke@StPetePride.com

Nonprofit (Employee Identification Number): 14-1876777

Name of the **For-profit** Corporation:

Name of Responsible Party (President or CEO ONLY):

Title of Responsible Party:

Physical Address of Responsible Party:

Phone Number of Responsible Party:

Email Address of Responsible Party:

For-profit (Employee Identification Number)

Please include a copy of the the current IRS Nonprofit Affidavit / For Profit

What method of invoicing would your organization prefer?

☐ BY Mail

Contact Name

Address

City, State, Zip

☐ BY EMAIL

Email Address:

St Pete Pride, Inc

PROFIT AND LOSS

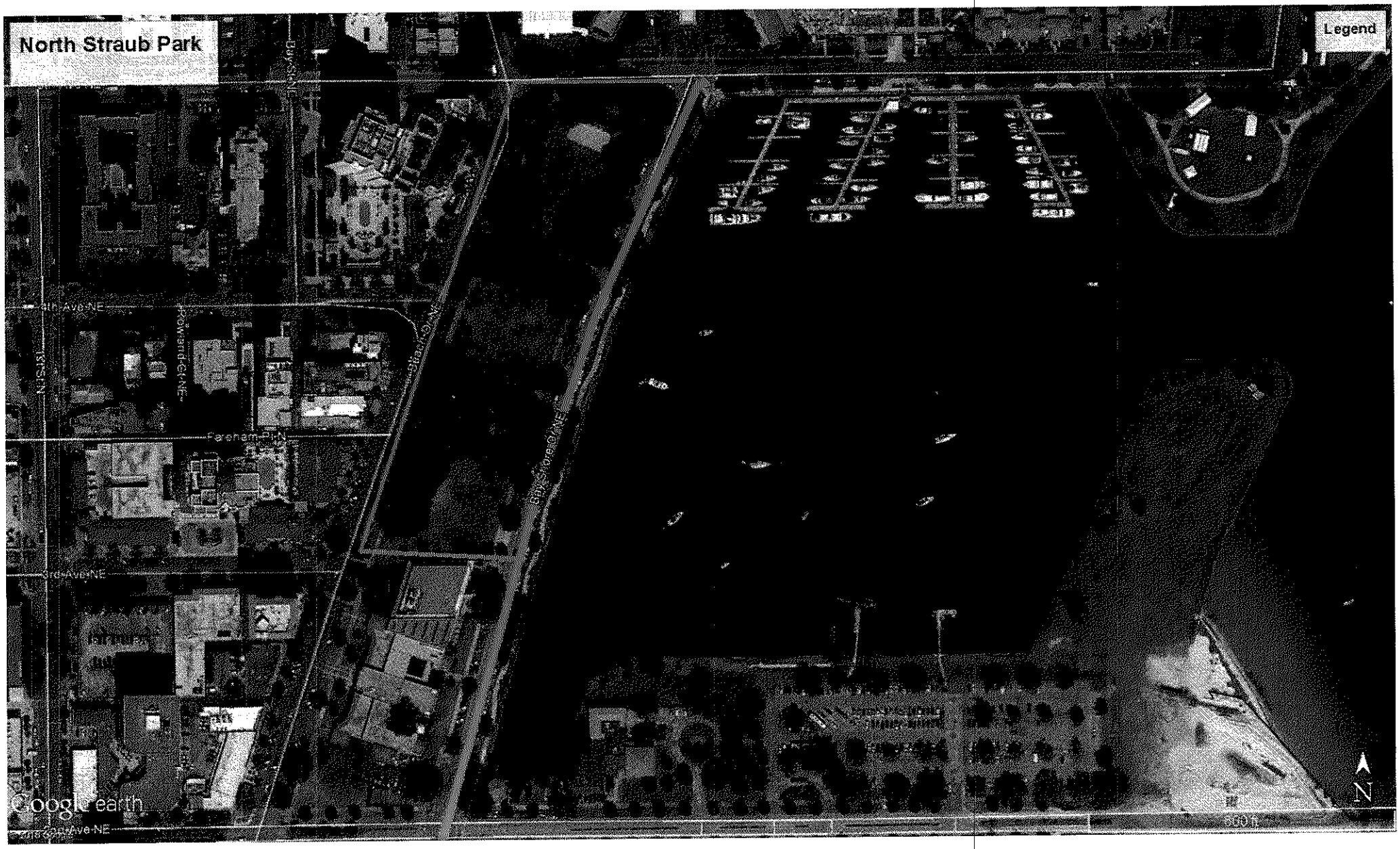
January - December 2017

	TOTAL
Income	
Development Income	
General Donation	4,854.75
Merchandise	5,995.46
Pride Guide	32,659.50
Special Events	
Pre-Pride Events	7,095.00
The Red & Green Party	24,637.82
Total Special Events	**31,732.82**
Sponsorship	159,446.50
Community Leadership Program	8,750.00
St Pete Pride Reception	1,452.15
Total Sponsorship	**169,648.65**
Total Development Income	**244,891.18**
Investment Income	961.82
Operations Income	
Operational	
Discounts/Refunds Given	-1,460.39
Interest	4.21
Processing Fee Donation	1,428.22
Total Operational	**-27.96**
Pride Weekend	
Beverages	85,029.00
Bleachers at Straub	3,594.70
Festival	
Registration Fees	
Application Fee	3,190.00
Corporate	20,210.00
Electric	3,300.00
Food Vendor	9,820.00
Hyperlink	495.00
Insurance Add-on	1,615.00
Non-Profit	11,450.00
Small Business	28,060.00
Table/Chairs	1,830.00
Tent Rental	5,450.00
Total Registration Fees	**85,420.00**
Total Festival	**85,420.00**
Glamstands	26,538.59
Parade	
Registration Fees	
Application/Trash Fee	940.00
Corporate	17,010.00

	TOTAL
Hyperlink	165.00
Non-Profit	6,790.00
Parade Sponsor's Fee	1,500.00
Small Business	5,850.00
Total Registration Fees	**32,255.00**
Total Parade	**32,255.00**
SP2 Concert	3,270.00
Total Pride Weekend	**236,107.29**
Total Operations Income	**236,079.33**
Unapplied Cash Payment Income	0.00
Total Income	**$481,932.33**
GROSS PROFIT	**$481,932.33**
Expenses	
Community Grants	3,500.00
Development Expenses	40.00
Merchandise	2,160.40
Pride Guide	19,200.00
Special Events	5,182.77
Pre-Pride Events	5,176.58
Taste of Pride	3,000.00
The Red & Green Party	11,869.53
Total Special Events	**25,228.88**
Sponsorships	
Sponsor Relations	3,062.09
Stonewall Reception	8,299.70
Total Sponsorships	**11,361.79**
Volunteers	4,751.03
Total Development Expenses	**62,742.10**
Operations Expenses	
Investment Fees	221.87
Marketing	20.68
Artwork & Creative Services	9,691.23
Email Services	800.00
Printing	10,395.74
Social Networking	4,109.99
Website	149.75
Total Marketing	**25,167.39**
Operational	
Bank Charges	247.02
Legal & Professional Fees	2,047.50
Merchant Services	7,333.07
Payroll Net Pay	57,285.30
Payroll Service	1,216.74
Payroll Tax Liabilities	26,915.52
Rent or Lease of Buildings	7,246.55
Supplies & Materials	2,138.82
Technology	3,917.25
Total Operational	**108,347.77**

	TOTAL
Outreach	
Dues & subscriptions	749.00
Registration Fees	4,164.02
Sponsorships	2,000.00
Travel	8,719.95
Total Outreach	**15,632.97**
Pride Weekend	80,894.31
Advertising/Promotional	64.01
Beverages	
Beverage Sales Tax	1,120.36
Product & Services	48,408.27
Total Beverages	**49,528.63**
Bleachers at Straub	
Equipment Rental	
Toilets	700.00
Total Equipment Rental	**700.00**
Infrastructure	1,450.00
Total Bleachers at Straub	**2,150.00**
Entertainment	9,113.17
Festival	
Decorations	3,623.65
Equipment Rental	
Electric / Generators	510.47
Table/Chairs	1,292.50
Tents	6,800.00
Toilets	3,665.00
Total Equipment Rental	**12,267.97**
Labor	1,328.00
Permits	2,190.00
Total Festival	**19,409.62**
Glamstands	
Hospitality	10,897.96
Infrastructure	4,413.00
Toilets	1,750.00
Total Glamstands	**17,060.96**
Insurance	9,895.32
Parade	
Awards	1,100.69
Cost of Labor	3,450.00
Private Security	2,196.00
Total Cost of Labor	**5,646.00**
Decorations	6,347.72
Float Rental	2,600.00
Pyrotechnics	10,000.00
Total Decorations	**18,947.72**
Infrastructure	368.19
Audio/Video	7,575.00
Fencing	1,181.50

	TOTAL
Stage	1,875.00
Tent Installation	3,680.74
Total Infrastructure	**14,680.43**
Permits	30.00
Rentals/Services	843.11
Toilets	1,460.00
Total Rentals/Services	**2,303.11**
Total Parade	**42,707.95**
SP2 Concert	
Entertainment	1,800.00
Infrastructure	
Audio/Video	4,075.00
Fencing	1,181.50
Stage	925.00
Total Infrastructure	**6,181.50**
Total SP2 Concert	**7,981.50**
Total Pride Weekend	**238,805.47**
Total Operations Expenses	**388,175.47**
Total Expenses	**$454,417.57**
NET OPERATING INCOME	**$27,514.76**
NET INCOME	**$27,514.76**


North Straub Park
Legend
Bay Shore Dr NE
4th Ave NE
Brownsville Ct NE
Fareham Pl N
3rd Ave NE
Bay Shore Dr NE
Bay Shore Dr NE
Google earth
N

IRS Department of the Treasury
Internal Revenue Service
P.O. Box 2508
Cincinnati OH 45201

In reply refer to: 0248560116
Oct. 06, 2009 LTR 4168C E0
14-1876777 000000 00
00011929
BODC: TE

ST PETE PRIDE INC
PO BOX 12647
ST PETERSBURG FL 33733-2647

10047

Employer Identification Number: 14-1876777
Person to Contact: Ms. Harper
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your request of Sep. 25, 2009, regarding your tax-exempt status.

Our records indicate that a determination letter was issued in January 2004, that recognized you as exempt from Federal income tax, and discloses that you are currently exempt under section 501(c)(3) of the Internal Revenue Code.

Our records also indicate you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section 509(a)(2).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,

Michele M. Sullivan

Michele M. Sullivan, Oper. Mgr.
Accounts Management Operations I

Florida Department of State

DIVISION OF CORPORATIONS

Detail by Entity Name

Florida Not For Profit Corporation
ST. PETE PRIDE, INC.

Filing Information

Document Number	N03000002767
FEI/EIN Number	14-1876777
Date Filed	03/26/2003
State	FL
Status	ACTIVE

Principal Address

2227 CENTRAL AVE
ST. PETERSBURG, FL 33713

Changed: 03/28/2016

Mailing Address

PO BOX 12647
ST. PETERSBURG, FL 33733

Changed: 02/12/2009

Registered Agent Name & Address

Blankenship, Luke
2227 CENTRAL AVE
ST. PETERSBURG, FL 33713

Name Changed: 09/18/2017

Address Changed: 03/28/2016

Officer/Director Detail

Name & Address

Title President

SCION, Crowder
PO BOX 12647
ST. PETERSBURG, FL 33733

Title Treasurer

SOLOMONS, STANLEY P

PO BOX 12647
ST. PETERSBURG, FL 33733

Title Executive Director

Blankenship, Luke
PO BOX 12647
ST. PETERSBURG, FL 33733

Title VP

LAURA, LEGRETTA
PO BOX 12647
ST. PETERSBURG, FL 33733

Title Director

Aller, Jonathan
2227 CENTRAL AVE
ST. PETERSBURG, FL 33713

Title Director

McGrath, Susan
2227 CENTRAL AVE
ST. PETERSBURG, FL 33713

Title Secretary

Bundy, David Michael
PO BOX 12647
ST. PETERSBURG, FL 33733

Title Director

Bruemmer, Nathan
PO BOX 12647
ST. PETERSBURG, FL 33733

Annual Reports

Report Year	Filed Date
2017	02/10/2017
2017	09/18/2017
2018	01/25/2018

Document Images

01/25/2018 -- ANNUAL REPORT	View image in PDF format
09/18/2017 -- AMENDED ANNUAL REPORT	View image in PDF format
02/10/2017 -- ANNUAL REPORT	View image in PDF format
06/22/2016 -- AMENDED ANNUAL REPORT	View image in PDF format
03/28/2016 -- ANNUAL REPORT	View image in PDF format
02/23/2015 -- ANNUAL REPORT	

st.petersburg

Contract/Permit

Contract #: 25389
Date: 06 Nov 2018

User: JSBENNIN
Status: Firm

ST PETE PRIDE INC
LUKE BLANKENSHIP
PO BOX 12647
ST PETERSBURG FL 33733 USA

Primary #: (727) 643-9160
Secondary #: (727)
Other #: ()

Purpose of Use: ST PETE PRIDE WEEKEND

Expected: 50,000

Co-Sponsored Event

Contract Balance $1,059.10

Conditions of Use: Insurance Required

Other Information:

Use of beer and wine	Yes
Use of fencing	Yes
Use of liquor	Yes

Date(s) and Time(s) of Use: **Starting: Wed 19 Jun 19 06:00 am** **Ending: Tue 25 Jun 19 09:00 pm**

Facility/Equipment	Day	Date	Time	Fee	Extra Fee	Tax	Total
North Shore Park	Wed	19 Jun 2019	06:00 AM	$0.00	$200.00	$0.00	$200.00
Park		25 Jun 2019	09:00 PM				
Pioneer Park	Wed	19 Jun 2019	06:00 AM	$0.00	$200.00	$0.00	$200.00
Park		25 Jun 2019	09:00 PM				
North Straub Park	Wed	19 Jun 2019	06:00 AM	$0.00	$200.00	$0.00	$200.00
Park		25 Jun 2019	09:00 PM				
South Straub Park	Wed	19 Jun 2019	06:00 AM	$0.00	$200.00	$0.00	$200.00
Park		25 Jun 2019	09:00 PM				
Al Lang Park	Wed	19 Jun 2019	06:00 AM	$0.00	$200.00	$0.00	$200.00
Park		25 Jun 2019	09:00 PM				
Vinoy Park	Wed	19 Jun 2019	06:00 AM	$0.00	$300.00	$0.00	$300.00
Vinoy Park		25 Jun 2019	09:00 PM				
Demens Landing Park	Fri	21 Jun 2019	06:00 AM	$0.00	$0.00	$0.00	$0.00
Park		24 Jun 2019	09:00 PM				
Albert Whitted Park	Sat	22 Jun 2019	06:00 AM	$0.00	$200.00	$0.00	$200.00
Park		25 Jun 2019	09:00 PM				

Additional Fees:

Extra Fee	Quantity	Charge	Tax	Total
Co-Sponsored Application Fee	1	$30.00	$0.00	$30.00
				$30.00

Extra Fee - Bookings	Hours	Quantity	Charge	Tax	Total
Co-Sponsored Permit Fee	882:00	6	$1,200.00	$0.00	$1,200.00
Co-Sponsored Permit Fee (Vinoy)	159:00	1	$300.00	$0.00	$300.00
		7	$1,500.00	$0.00	$1,500.00

Charges:

Fees	Extra Fees	Tax	Total	Deposit	Total Applied	Contract Balance	Account Balance
$ 0.00	$1,530.00	$0.00	$1,530.00	$0.00	$470.90	$1,059.10	$1,059.10

Balance of rental due and payable immediately.

Payments:

Date	Amount	Payment Type	Reference	Receipt Number

Contract #: 25389
Date: 06 Nov 2018

User: JSBENNIN
Status: Firm

11 Oct 2017	$40.90	Check	Rental	2910794
06 Nov 2018	$30.00	Check	Rental	3188316
06 Nov 2018	$400.00	Check	Rental	3188317

Additional Notes:

I have read this Agreement and agree to comply with the terms and conditions set forth in this Agreement. I also understand this Agreement is not final until approved and executed by the Parks and Recreation Superintendent or designee.

By:(Sign Name) _____

(Print Name) **LUKE BLANKENSHIP**

ST PETE PRIDE INC
Name of User Organization, If Applicable

CITY OF ST. PETERSBURG, FLORIDA

By:(Sign Name): _____
Parks and Recreation Superintendent

(Print Name) _____
Parks and Recreation Department

_____ ☐ Approved or ☐ Rejected Date: _____
Supervisor II / Foreman

_____ ☐ Approved or ☐ Rejected Date: _____
Manager

_____ ☐ Approved or ☐ Rejected Date: _____
Manager

The Americans with Disabilities Act (A.D.A.) guarantees equal opportunity for people with disabilities. Special accommodation requests such as sign language interpreters, taped or Braille materials, assistive listening devices, etc., should be made at least one week prior to the activity or program. Individuals using TTD devices, please contact us using the Florida Relay Service at 800-955-8771.

st.petersburg

City of St. Petersburg

ST PETE PRIDE INC
LUKE BLANKENSHIP
PO BOX 12647
ST PETERSBURG, FL 33733 USA

Receipt #: 3188316
User: JSBENNIN
Issued: Tue 06 Nov 18 10:02 am

Description	Amount
Previous Balance	$1,489.10
Applied To: 25389 - ST PETE PRIDE WEEKEND North Shore Park - Park June 19, 2019 6:00 am to June 25, 2019 9:00 pm	$30.00
Payment: Check	($30.00)
Balance	$1,459.10

APPROVED REFUNDS ARE BY CHECK ONLY

st.petersburg

City of St. Petersburg

ST PETE PRIDE INC
LUKE BLANKENSHIP
PO BOX 12647
ST PETERSBURG, FL 33733 USA

Receipt #: 3188317
User: JSBENNIN
Issued: Tue 06 Nov 18 10:04 am

Description	Amount
Previous Balance	$1,459.10
Applied To: 25389 - ST PETE PRIDE WEEKEND North Shore Park - Park June 19, 2019 6:00 am to June 25, 2019 9:00 pm	$400.00
Payment: Check	($400.00)
Balance	$1,059.10

APPROVED REFUNDS ARE BY CHECK ONLY

CITY OF ST. PETERSBURG
PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENT APPLICATION

st.petersburg www.stpete.org

st. petersburg parks & recreation

Date Received: 10/30/18
Check or Cash: 1577 / 1578
Application #: 81
Packet: C
Permit #: 25390

Event Title: PINOT IN THE PARK 2019 Phone No.: 727 542 5333 Fax No.:
Entity Name: HISTORIC KENWOOD N.A Federal I.D. Number:
Event Date(s): 4/6/19 Location: SEMINOLE PARK 3rd & 29th
Day 1 of Event: SAT Time Gates Open: 7PM Ending Time: 10PM
Day 2 of Event: Time Gates Open: Ending Time:
Day 3 of Event: Time Gates Open: Ending Time:
Application Prepared by: KATHLEEN YOUNG Phone: 727 542 5333
Title: CO CHAIR Cell Phone:
Address: 2945 7th AVE N. City: ST PETE State: FL Zip: 33713
Email Address: KKYOUNG50@AOL.COM
Additional Contact Person: SARA ELLEN LAMBERT BURNETT Day Phone: 727 550 6152
What month/year were you incorporated as nonprofit? 5/18/2011
List all 501(c)3 entities that will benefit from this event. HISTORIC KENWOOD NEIGHBORHOOD ASSN.
Name of the for-profit entity? NA

Describe your event with details.

AN UPSCALE EVENT THAT HAS GROWN EVERY YEAR AND BRINGS HKNA RESIDENTS TOGETHER TO CELEBRATE OUR CITY - IN ADDITION IT BRINGS WONDERFUL FOOD + WINE WITH A PORTION OF THE PROCEEDS BEING DONATED

Describe what economic benefit and impact this event will bring to St. Petersburg.

GROSS PROCEEDS WERE OVER 13K TO DO IMPROVEMENTS TO OUR NEIGHBORHOOD

Each co-sponsored entity must possess liability insurance naming the City of St. Petersburg as an additional insured and secure said insurance in the amount determined by the City.

Does your group presently have liability insurance? ☑ YES ☐ NO How much? 1 MILLION
Are there plans to sell or distribute beer/wine at your event? ☐ YES ☑ NO
Will there be an admission / registration fee? ☑ YES ☐ NO Advanced Fee: Day of:
Please provide the website address for your event. WWW.PINOTINTHEPARK.ORG
Please provide a phone number that can be advertised to the public. 727 642-5333
What is the estimated attendance for this event? Spectators 30 Participants 144 Last Year's Total Attendance 150

PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENTS
SUMMARY SHEET

Review and check all conditions which apply to this event: Note the corresponding obligation for each condition.

Condition		Obligation
☑ Public Invited		General Liability Insurance
☑ Located in Park		Park Permit
☑ Vending Product / Merchandise Sales		Occupational License
☑ Vending Food / Beverage		Health Inspection
☐ Vendors / Exhibitors	How many?	
☑ Vending Beer / Wine		Alcohol Permit Additional Insurance Required
☑ Erecting Tents - Larger than 10ft x 12ft	How many?	Temporary Structure Permit
☑ Fence Installation	What type? PVC + ROPE	Temporary Structure Permit
☑ Other Structures	What structure?	Temporary Structure Permit
☑ Open Flame Food Preparation		Fire Inspection Permit
☐ Pyrotechnics		Fireworks Permit
☐ Require Street Closure		Parade or Street Closure Permit(s)
☐ VIP Area		
☐ Staging	☐ Professional ☐ Showmobile ☐ Other	
☑ Amplified Sound	☑ Performers ☐ Announcement Only	
☐ Security	☐ Daytime - Private ☐ Overnight - Private ☐ Event Time Frame - SPPD	
☑ Sanitary Facilities - Port-O-Lets	Regular Units 1 Disabled Units 1 Hand Washing 1	
☐ Off-site Parking / Shuttle		
☐ Semitruck / Tractor Trailer		

Marketing: Please check all that apply.

- ☑ Invitations
- ☑ Posters / Flyers
- ☑ Newspaper / Internet
- ☐ Radio
- ☐ Television
- ☐ Remote Broadcast

City logo should be used in any promotional materials, posters, flyers, ads, website, public service announcements, and press releases.

Electrical Requirements:

Does your event require any power needs using more than the standard 110/20amp located in the parks? ☑ YES ☐ NO

If YES, check all that apply. ☐ RV'S ☐ Coffee Vendors ☐ Ice Bins ☐ Freezers ☐ Ice Cream Vendors ☐ Catering Trucks ☐ Other:

Please explain the details of the above items checked. Tell us how much and what type of power they would require.

WE NEED 2-3 WHISPER GENERATOR & ELEC CORDS + TURLE

Will you supply your own generators? ☐ YES ☑ NO

Will your event have a licensed electrician on-site during the event? ☑ YES ☐ NO If YES, who? CITY EMPLOYEE

Will your event be requesting any variances from City policies or procedures? If YES, please explain.

If City permits, licenses, or services are required for event, who will pay for them?

Name: HISTORIC KENWOOD NEIGHBORHOOD Phone: 727 542 5333

Address (including zip): PO BOX 15134 ASSN ST PET 33733

Type of music, # of stages, and # of bands.

ACOUSTIC GUITAR

List Vending Products. Name & Provider.

DONATED FOOD PREP FROM LOCAL CHEFS

For Use of Beer/Wine - Please provide name, address and phone number of the sponsoring 501(c)3 or catering company.

HISTORIC KENWOOD NEIGHBORHOOD ASSN
PO BOX 15134
ST PET 33733 727 542 5333

Explain subject/purpose of all speeches/demonstrations which will occur.

NONE. PA SYSTEM TO WELCOME GUESTS, AND ANNOUNCE DINNER

Discuss your load in/load out parking needs, include times and dates.

WE WILL UNLOAD OUR CARS/TRUCKS FROM the STREET — NO SPECIAL REQUIREMENTS

Other Comments: Please describe your fee structure.

$ IN ADVANCE ONLY. NO TICKETS AT DOOR

Other comments:

AS ALWAYS, WE APPRECIATE SUPPORT FROM OUR CITY

I represent and warrant that the purpose of the proposed activity/event and conduct of the sponsor(s) and the participants shall conform to all requirements of law and all ordinances of the State of Florida, Pinellas County, and the City of St. Petersburg including, but not limited to, City noise ordinances and Parks and Recreation Department Policies and Procedures. I acknowledge that failure to observe such laws, ordinances, or policies and procedures will result in an immediate cancellation of the event and all permits.

WITHOUT LIMITING THE GENERALITY OF THE FOREGOING, I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE PARKS AND RECREATION DEPARTMENT POLICIES AND PROCEDURES PERTAINING TO THE USE OF PARKS AND THE PARK RULES SET FORTH IN ARTICLE II, CHAPTER 21, OF THE ST. PETERSBURG CITY CODE, INCLUDING BUT NOT LIMITED TO THE INDEMNIFICATION AND INSPECTION OBLIGATIONS ASSUMED BY ME AND THE PERSON OR ENTITY ON WHOSE BEHALF THIS APPLICATION IS BEING MADE.

I certify that the facts contained in this application are accurate.

Name: KATHLEEN YOUNG Title: CO CHAIR Date: 10/24/18

Appendix A

Co-Sponsored Event Park Fee Structure

* Events in Vinoy Park will be assessed $300.00 per event day (e.g.,1 day event = $300.00, 2 days = $600.00, 3 days or more = $900.00.) This includes the $30.00 park permit fee.

* Events in any other park will be assessed $200.00 per event day (e.g., 1 day event = $200.00, 2 days = $400.00, 3 or more days = $600.00). This includes the $30.00 park permit fee.

* The above fees will be due at the time you submit your application plus the $30.00 co-sponsored application fee.

* All co-sponsored event applications must be submitted at least 6 month prior to the event.

* Any application for a co-sponsored event submitted inside the six (6) month time frame will be assessed a non refundable $1,200.00 late fee.

* **The City requires payment in advance for all City services estimated and/or provided for first time events and one of a kind nonrecurring events.**

* **Payment will be required at least ten (10) business days prior to the start of the event and shall be in the form of cash, certified check, or an irrevocable bank letter of credit.**

* **All first time entities requesting events will be required to complete a credit application.**

Appendix B
President or CEO
Responsible Party Information

Please complete the information below for each responsible party.

Name of the **Nonprofit** Corporation: HISTORIC KENWOOD NEIGHBORHOOD ASSN

Name of Responsible Party (President or CEO ONLY): MICHERENE

Title of Responsible Party: PRES

Physical Address of Responsible Party: 6th AVE ST PETE 33713

Phone Number of Responsible Party:

Email Address of Responsible Party:

Nonprofit (Employee Identification Number): 59-0953652

Name of the **For-profit** Corporation: NA

Name of Responsible Party (President or CEO ONLY):

Title of Responsible Party:

Physical Address of Responsible Party:

Phone Number of Responsible Party:

Email Address of Responsible Party:

For-profit (Employee Identification Number)

Please include a copy of the the current IRS Nonprofit Affidavit / For Profit

What method of invoicing would your organization prefer?

☐ BY Mail

Contact Name

Address

City, State, Zip

☐ BY EMAIL

Email Address:

APPENDIX C
STATEMENT OF REVENUE AND EXPENSES FORM
PRIOR YEAR'S EVENT
(Must be completed)

Name of Event:
Date(s) of Event: -

I. REVENUE SOURCES (attach sheet if more space is needed)

		Amount
1.	TICKET SALES	9000 —
2.	SILENT AUCTION	4000 —
3.		
4		
5.		
6.		
7.		
8.		
	TOTAL GROSS REVENUE	13000 —

II. EXPENSES (attach sheet if more space is needed)

1.	TENT + RENTAL SUPPLIES	4000 —
2.	CITY	600 —
3.	ENTERTAINMENT	400
4	ADVERTISING	600 —
5.	PORT O LETS	300 —
6.	OTHER SUPPLIES	2500 —
7.		
8.		
9.		
10.		
11.		
12.		
	TOTAL OPERATING EXPENSES	8400
	TOTAL NET INCOME	4600

III. ALLOCATION OF NET INCOME (attach sheet if more space is needed)

1.	HKNA	2600 —
2.	ST PETE CULINARY CNTR.	2000 —
3.		
4.		
5.		
6.		
	TOTAL ALLOCATION OF NET INCOME	4600 —

Prepared by: KATHLEEN YOUNG Date: 10/24/18

Print Application

Submit Application by Er

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: MAY 18 2011

HISTORIC KENWOOD NEIGHBORHOOD
ASSOCIATION INC
PO BOX 15134
ST PETERSBURG, FL 33733-5134

Employer Identification Number:
57-0953652
DLN:
17053258328010
Contact Person:
JEFFREY GAUNCE
ID# 31614
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
509(a)(2)
Form 990 Required:
Yes
Effective Date of Exemption:
September 10, 2010
Contribution Deductibility:
Yes
Addendum Applies:
Yes

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

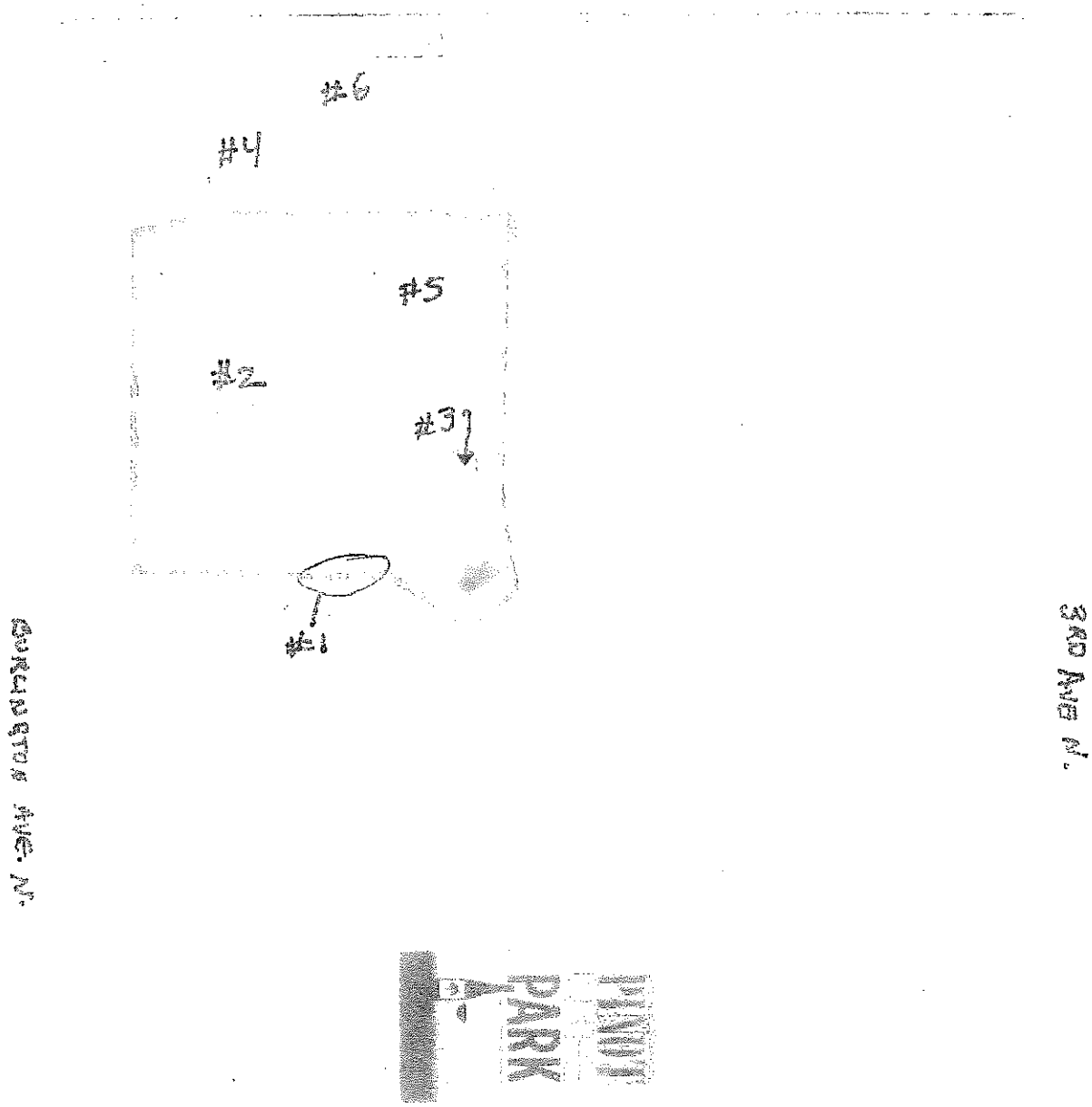
Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Seminole Park, St. Petersburg, FL

#1 – Barricade (——)
#2 – Guest Seating
#3 -- Salmon Grilling Pit
#4 -- Entrance/Exit
#5 -- Food Service Area
#6 -- Port-A-Lets

30th Street N.



29th St. N.

ATTACHMENT "A"

Florida Department of State DIVISION OF CORPORATIONS

Department of State / Division of Corporations / Search Records / Detail By Document Number /

Detail by Entity Name

Florida Not For Profit Corporation
HISTORIC KENWOOD NEIGHBORHOOD ASSOCIATION, INC.

Filing Information

Document Number	N38463
FEI/EIN Number	57-0953652
Date Filed	06/01/1990
State	FL
Status	ACTIVE
Last Event	AMENDMENT
Event Date Filed	01/18/2011
Event Effective Date	NONE

Principal Address

242 30th St N
ST. PETERSBURG, FL 33713

Changed: 01/06/2017

Mailing Address

POST OFFICE BOX 15134
ST. PETERSBURG, FL 33733-5134

Changed: 04/08/2005

Registered Agent Name & Address

Kellett, Linda D.
242 30th St. N.
ST. PETERSBURG, FL 33713

Name Changed: 01/06/2017

Address Changed: 01/06/2017

Officer/Director Detail

Name & Address

Title PRES

Everett, Michellene
POST OFFICE BOX 15134
ST. PETERSBURG, FL 33733-5134

Title VP

Carlisle, Nicole
POST OFFICE BOX 15134
ST. PETERSBURG, FL 33733-5134

Title SEC

Baker, MJ
POST OFFICE BOX 15134
ST. PETERSBURG, FL 33733-5134

Title TRES

Kellett, Linda D.
POST OFFICE BOX 15134
ST. PETERSBURG, FL 33733-5134

Annual Reports

Report Year	Filed Date
2016	01/06/2016
2017	01/06/2017
2018	02/14/2018

Document Images

02/14/2018 -- ANNUAL REPORT	View image in PDF format
01/06/2017 -- ANNUAL REPORT	View image in PDF format
01/06/2016 -- ANNUAL REPORT	View image in PDF format
01/10/2015 -- ANNUAL REPORT	View image in PDF format
01/04/2014 -- ANNUAL REPORT	View image in PDF format
01/19/2013 -- ANNUAL REPORT	View image in PDF format
01/11/2012 -- ANNUAL REPORT	View image in PDF format
01/18/2011 -- Amendment	View image in PDF format
01/17/2011 -- ANNUAL REPORT	View image in PDF format
01/04/2010 -- ANNUAL REPORT	View image in PDF format
02/05/2009 -- ANNUAL REPORT	View image in PDF format
01/18/2008 -- ANNUAL REPORT	View image in PDF format
10/19/2007 -- Amendment	View image in PDF format
04/15/2007 -- ANNUAL REPORT	View image in PDF format
04/28/2006 -- ANNUAL REPORT	View image in PDF format
04/08/2005 -- ANNUAL REPORT	View image in PDF format
08/13/2004 -- ANNUAL REPORT	View image in PDF format
04/21/2003 -- ANNUAL REPORT	View image in PDF format
03/24/2002 -- ANNUAL REPORT	View image in PDF format
04/30/2001 -- Name Change	View image in PDF format
03/27/2001 -- ANNUAL REPORT	View image in PDF format
01/22/2000 -- ANNUAL REPORT	View image in PDF format
02/25/1999 -- ANNUAL REPORT	View image in PDF format

st.petersburg

Contract/Permit

Contract #: 25390
Date: 06 Nov 2018

User: JSBENNIN
Status: Firm

HISTORIC KENWOOD NEIGHBORHOOD ASSOC
KATHLEEN YOUNG
PO BOX 15134
ST PETERSBURG FL 33733 5134 USA

Primary #: (813) 712-0796
Secondary #: ()
Other #: ()

Purpose of Use: PINOT IN THE PARK **Expected: 0** **Co-Sponsored Event**

Contract Balance $0.00

Conditions of Use: Insurance Required

Other Information:

Use of beer and wine	No
Use of fencing	No
Use of liquor	No

Date(s) and Time(s) of Use: **Starting: Sat 06 Apr 19 06:00 am** **Ending: Sat 06 Apr 19 11:00 pm**

Facility/Equipment	Day	Date	Time	Fee	Extra Fee	Tax	Total
Seminole Park	Sat	06 Apr 2019	06:00 AM	$0.00	$0.00	$0.00	$0.00
Park			11:00 PM				

Additional Fees:

Extra Fee	Quantity	Charge	Tax	Total
Application Processing Fee - Parks	1	$30.00	$0.00	$30.00
Co-Sponsored Application Fee	1	$30.00	$0.00	$30.00
				$60.00

Charges:

Fees	Extra Fees	Tax	Total	Deposit	Total Applied	Contract Balance	Account Balance
$ 0.00	$60.00	$0.00	$60.00	$0.00	$60.00	$0.00	($200.00)

Balance of rental due and payable immediately.

Payments:

Date	Amount	Payment Type	Reference	Receipt Number
20 Feb 2018	$30.00	Check	Rental	2985263
06 Nov 2018	$30.00	Check	Rental	3188339

Additional Notes:

I have read this Agreement and agree to comply with the terms and conditions set forth in this Agreement. I also understand this Agreement is not final until approved and executed by the Parks and Recreation Superintendent or designee.

By:(Sign Name) _____

(Print Name) **KATHLEEN YOUNG**

HISTORIC KENWOOD NEIGHBORHOOD ASSOC
Name of User Organization, If Applicable

CITY OF ST. PETERSBURG, FLORIDA

By:(Sign Name): _____
Parks and Recreation Superintendent

(Print Name) _____
Parks and Recreation Department

_____ Supervisor II / Foreman	☐ Approved or	☐ Rejected	Date: _____
_____ Manager	☐ Approved or	☐ Rejected	Date: _____
_____ Manager	☐ Approved or	☐ Rejected	Date: _____

The Americans with Disabilities Act (A.D.A.) guarantees equal opportunity for people with disabilities. Special accommodation requests such as sign language interpreters, taped or Braille materials, assistive listening devices, etc., should be made at least one week prior to the activity or program. Individuals using TTD devices, please contact us using the Florida Relay Service at 800-955-8771.

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City of St. Petersburg

HISTORIC KENWOOD NEIGHBORHOOD ASSOC
BRENDA K GORDON
PO BOX 15134
ST PETERSBURG, FL 33733 5134 USA

Receipt #: 3188339
User: JSBENNIN
Issued: Tue 06 Nov 18 10:20 am

Description	Amount
Previous Balance	$30.00
Applied To: 25390 - PINOT IN THE PARK Seminole Park - Park April 6, 2019 6:00 am to April 6, 2019 11:00 pm	$30.00
Payment: Check	($30.00)
Balance	$0.00

APPROVED REFUNDS ARE BY CHECK ONLY

st.petersburg

City of St. Petersburg

HISTORIC KENWOOD NEIGHBORHOOD ASSOC
BRENDA K GORDON
PO BOX 15134
ST PETERSBURG, FL 33733 5134 USA

Receipt #: 3188341
User: JSBENNIN
Issued: Tue 06 Nov 18 10:20 am

Description		Amount
Previous Balance		$0.00
Payment:	Check	($200.00)
Balance		($200.00)

APPROVED REFUNDS ARE BY CHECK ONLY

CITY OF ST. PETERSBURG
PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENT APPLICATION

st.petersburg
www.stpete.org

st. petersburg parks & recreation

Date Received: 9/18/18
Check or Cash:
Application #: 82
Packet: B
Permit #: 25391

Event Title: Heroes Memorial 5K/10K Run Phone No.: 727-415-1988 Fax No.:
Entity Name: Heroes of the St.Pete Police, Inc. Federal I.D. Number: 20-0342484
Event Date(s): Fri. March 22, 2019 Location: Demens Landing Park
Day 1 of Event: 3/22/19 Time Gates Open: 3pm Ending Time: 10pm
Day 2 of Event: — Time Gates Open: — Ending Time: —
Day 3 of Event: — Time Gates Open: — Ending Time: —

Application Prepared by: Michael Mannino Phone: 727-415-1988
Title: Race Director & Committee Member Cell Phone: Same
Address: 1212 Sedeeva Circle S. City: Clearwater State: FL Zip: 33755
Email Address: mannino.michael@gmail.com
Additional Contact Person: Suzanne Mannino Day Phone: 727-226-7223
What month/year were you incorporated as nonprofit? March 2004
List all 501(c)3 entities that will benefit from this event. Heroes of the St. Pete Police, Inc.
Name of the for-profit entity? N/A

Describe your event with details.

5K and 10K race with 1 mile walk to encourage citizens to support the families of our fallen officers, and a way for our officers to honor our fallen officers.

No changes to years past.

Describe what economic benefit and impact this event will bring to St. Petersburg.

This event will bring individuals + families to downtown St. Petersburg to enjoy our downtown area.

Each co-sponsored entity must possess liability insurance naming the City of St. Petersburg as an additional insured and secure said insurance in the amount determined by the City. — will Provide COI naming city

Does your group presently have liability insurance? ☐ YES ☒ NO How much?
Are there plans to sell or distribute beer/wine at your event? ☒ YES ☐ NO
Will there be an admission / registration fee? ☒ YES ☐ NO Advanced Fee: $30 Day of:
Please provide the website address for your event. heroesofthestPetePolice.org
Please provide a phone number that can be advertised to the public. 727-415-1988
What is the estimated attendance for this event? Spectators Participants 500 Last Year's Total Attendance 450

☒ Same as previous year Please check the equipment and/or facilities you are requesting.

Recreation Equipment

Showmobile (Yes/No) NO

Bleacher(s) needed. Each bleacher approx. 180 people) NO

Tables (6 ft) # needed 20 Chairs # needed 100

Public Address System N/A

# of portable risers needed (4 in. x 8 in. x 16 in. sections) 4

Special Events Facilities

☐ Mahaffey Theater

☐ Coliseum

☐ Sunken Gardens

☐ Boyd Hill

☐ Non-City Locations

Which Location? Demens Landing Park

The following departments may provide and charge for additional services. You will be provided cost estimates in your Co-sponsored Agreement.

POLICE:	Public Safety Personnel, Marine Services
TRAFFIC:	Personnel, Equipment (cones, barricades, no parking signs)
FIRE:	Paramedics, Inspectors
PARKS SERVICES:	Cleanup Personnel, Dumpster(s), Trash Receptacles, Event Site Preparation and Restoration
RECREATION SERVICES:	On-site Presence, Logistics Help, Liaison with Other Ddepartments

Note: The City does not provide tents, Port-O-Lets, or large quantities of tables and chairs.

I certify that the event will be open to all citizens and that individuals will not be barred from participation due to race, creed, color, national origin, sex, age, or physical impairment. I understand that a financial report of the event is due in the Parks and Recreation office within 30 days of the completion of the event. I also understand that the City is to be shown as a co-sponsor on any promotional materials produced for the event. I agree to obtain the required liability insurance and to secure all necessary city/county/state permits/licenses. I further certify that the facts contained in this application are accurate.

Name: Michael A. Mann Title: Race Director Date: 9/24/18

Co-Sign: Title: Date:

NOTE: a. **If person/entity preparing this application is not representing a nonprofit entity, the application must be co-signed by someone from a sponsoring nonprofit entity. A copy of the sponsoring entity's 501(c)3 designation must accompany this application.**

b. **If your entity has outstanding financial obligations with any department within the City of St. Petersburg, your application will not be processed until debt if paid.**

c. **Applications lacking information or the required completed appendixes listed below will not be processed.**

PLEASE ATTACH THE FOLLOWING

1. Route map for parade, run, walk, and/or bike event.
2. Site map of event and detail schedule of each day's events including open and close times.
3. Complete Appendix B and Appendix C.
4. Check for $30.00 for co-sponsored application processing (non-refundable).
5. Check for park permit fee. See Appendix A for fee structure.
6. A copy of 501(c)3 designation (if applicable)

FOR FURTHER INFORMATION, PLEASE CALL LYNN GORDON, PARKS & RECREATION MANAGER, 727-893-7766 or EMAIL: StPeteEvents@stpete.org

st.petersburg
www.stpete.org

PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENTS
SUMMARY SHEET

st. petersburg parks & recreation

Review and check all conditions which apply to this event: Note the corresponding obligation for each condition.

Condition		Obligation
[X] Public Invited		General Liability Insurance
[X] Located in Park		Park Permit
[ ] Vending Product / Merchandise Sales		Occupational License
[X] Vending Food / Beverage		Health Inspection
[ ] Vendors / Exhibitors	How many?	
[X] Vending Beer / Wine		Alcohol Permit Additional Insurance Required
[ ] Erecting Tents - Larger than 10ft x 12ft	How many?	Temporary Structure Permit
[ ] Fence Installation	What type?	Temporary Structure Permit
[ ] Other Structures	What structure?	Temporary Structure Permit
[ ] Open Flame Food Preparation		Fire Inspection Permit
[ ] Pyrotechnics		Fireworks Permit
[X] Require Street Closure		Parade or Street Closure Permit(s)
[X] VIP Area		
[ ] Staging	[ ] Professional [ ] Showmobile [ ] Other	
[X] Amplified Sound	[ ] Performers [X] Announcement Only	
[ ] Security	[ ] Daytime - Private [ ] Overnight - Private [ ] Event Time Frame - SPPD	
[X] Sanitary Facilities - Port-O-Lets	Regular Units TBA Disabled Units TBA Hand Washing TBA	
[X] Off-site Parking / Shuttle		
[ ] Semitruck / Tractor Trailer		

Marketing: Please check all that apply.

- [ ] Invitations
- [X] Posters / Flyers
- [X] Newspaper / Internet
- [X] Social Media
- [ ] Radio
- [ ] Television
- [ ] Remote Broadcast

City logo should be used in any promotional materials, posters, flyers, ads, website, public service announcements, and press releases.

Electrical Requirements:

Does your event require any power needs using more than the standard 110/20amp located in the parks? ☐ YES ☒ NO

If YES, check all that apply. ☐ RV'S ☐ Coffee Vendors ☐ Ice Bins ☐ Freezers ☐ Ice Cream Vendors ☐ Catering Trucks

☒ Other:

Please explain the details of the above items checked. Tell us how much and what type of power they would require.

Speakers & Sound system, Finishline arch, lighting

Will you supply your own generators? ☒ YES ☐ NO

Will your event have a licensed electrician on-site during the event? ☐ YES ☒ NO If YES, who?

Will your event be requesting any variances from City policies or procedures? If YES, please explain.

NO

If City permits, licenses, or services are required for event, who will pay for them?

Name: Heroes of the St. Pete Police, Inc. Phone: 727-415-1988

Address (including zip): 100 2nd Ave. South, Suite #600, St. Petersburg, FL 33701

Type of music, # of stages, and # of bands.

(4) Risers from city, top 40's family friendly music, music player-NO Band

List Vending Products. Name & Provider.

TBA

For Use of Beer/Wine - Please provide name, address and phone number of the sponsoring 501(c)3 or catering company.

Heroes of the St. Pete Police, Inc.
100 2nd Ave South, Suite 600
St. Petersburg, FL 33701

Explain subject/purpose of all speeches/demonstrations which will occur.

award presentation + thank you's

Discuss your load in/load out parking needs, include times and dates.

Same as previous year.
Parking along city streets & lots + use of Al lang parking (if approved by Edwards Gray
Participants arrive around 4pm and depart between 7pm & 10pm.

Other Comments: Please describe your fee structure.

10K → $35 pre-registration & $50 day of event
5K → $30 pre-registration & $45 day of event
1 mile → $25 " " & $30 " "

Other comments:

I represent and warrant that the purpose of the proposed activity/event and conduct of the sponsor(s) and the participants shall conform to all requirements of law and all ordinances of the State of Florida, Pinellas County, and the City of St. Petersburg including, but not limited to, City noise ordinances and Parks and Recreation Department Policies and Procedures. I acknowledge that failure to observe such laws, ordinances, or policies and procedures will result in an immediate cancellation of the event and all permits.

WITHOUT LIMITING THE GENERALITY OF THE FOREGOING, I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE PARKS AND RECREATION DEPARTMENT POLICIES AND PROCEDURES PERTAINING TO THE USE OF PARKS AND THE PARK RULES SET FORTH IN ARTICLE II, CHAPTER 21, OF THE ST. PETERSBURG CITY CODE, INCLUDING BUT NOT LIMITED TO THE INDEMNIFICATION AND INSPECTION OBLIGATIONS ASSUMED BY ME AND THE PERSON OR ENTITY ON WHOSE BEHALF THIS APPLICATION IS BEING MADE.

I certify that the facts contained in this application are accurate.

Name: [signature] Title: Race Director & Committee Member Date: 9/24/18

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Appendix B
President or CEO
Responsible Party Information

Please complete the information below for each responsible party.

Name of the **Nonprofit** Corporation: Heroes of the St. Pete Police, Inc.

Name of Responsible Party (President or CEO ONLY): James Newman

Title of Responsible Party: President

Physical Address of Responsible Party: 100 2nd Ave South, Suite 600, St. Petersburg, FL 33701

Phone Number of Responsible Party: 727-321-6161 ext 230

Email Address of Responsible Party: jnewman@gsspa.com

Nonprofit (Employee Identification Number): 20-0342484

Name of the **For-profit** Corporation: n/a

Name of Responsible Party (President or CEO ONLY):

Title of Responsible Party:

Physical Address of Responsible Party:

Phone Number of Responsible Party:

Email Address of Responsible Party:

For-profit (Employee Identification Number)

Please include a copy of the the current IRS Nonprofit Affidavit / For Profit

What method of invoicing would your organization prefer?

☐ BY Mail

Contact Name

Address

City, State, Zip

☒ BY EMAIL

Email Address: jnewman@gsspa.com; dawnmp01@hotmail.com

5

ACORD®

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 10/05/2018

PRODUCER
East Main Street Insurance Services, Inc.
Will Maddux
PO Box 1298
Grass Valley, CA 95945
Phone: (530) 477-6521 Email: info@theeventhelper.com

THIS CERTIFICATION IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED
Heroes of the St. Pete Police and Fire
Heroes of the St. Pete Police and Fire, Inc.
100 2nd Ave. South, Suite 600
St. Petersburg, FL 33701

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Evanston Insurance Company	35378
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
		GENERAL LIABILITY				EACH OCCURRENCE INCLUDES BODILY INJURY & PROPERTY DAMAGE	$ 2,000,000
A	Y	X COMMERCIAL GENERAL LIABILITY	3DS5466-M1114705	03/22/2019	03/23/2019	MED EXP (Any one person)	$ 5,000
		CLAIMS MADE X OCCUR				PERSONAL & ADV INJURY	$ 2,000,000
		X Host Liquor Liability	3DS5466-M1114705	03/22/2019	03/23/2019	GENERAL AGGREGATE	$ 3,000,000
		GEN'L AGGREGATE LIMIT APPLIES PER:				PRODUCTS - COMP/OP AGG	$ 2,000,000
		X POLICY PRO-JECT LOC				DEDUCTIBLE	$ 1,000
		Retail Liquor Liability					$
		AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	$
		ANY AUTO					
		ALL OWNED AUTOS				BODILY INJURY (Per person)	$
		SCHEDULED AUTOS					
		HIRED AUTOS				BODILY INJURY (Per accident)	$
		NON-OWNED AUTOS					
						PROPERTY DAMAGE (Per accident)	$
		GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	$
		ANY AUTO				OTHER THAN AUTO ONLY: EA ACC	$
						AGG	$
		EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE	$
		OCCUR CLAIMS MADE				AGGREGATE	$
							$
		DEDUCTIBLE					$
		RETENTION $					$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU-TORY LIMITS / OTH-ER	
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT	$
		If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE	$
						E.L. DISEASE - POLICY LIMIT	$
		OTHER					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
Certificate holder listed below is named as additional insured per attached CG 20 26 07 04.
Attendance: 500, Event Type: Fun Run.

CERTIFICATE HOLDER

City of St. Petersburg
P.O. Box 2842
St. Petersburg, FL 33713

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ~~ENDEAVOR TO~~ MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, ~~BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.~~

AUTHORIZED REPRESENTATIVE Will Maddux

© ACORD CORPORATION 1988

Policy Number: 3DS5466-M1114705

COMMERCIAL GENERAL LIABILITY
CG 20 26 07 04

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)
City of St. Petersburg P.O. Box 2842 St. Petersburg, FL 33713
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

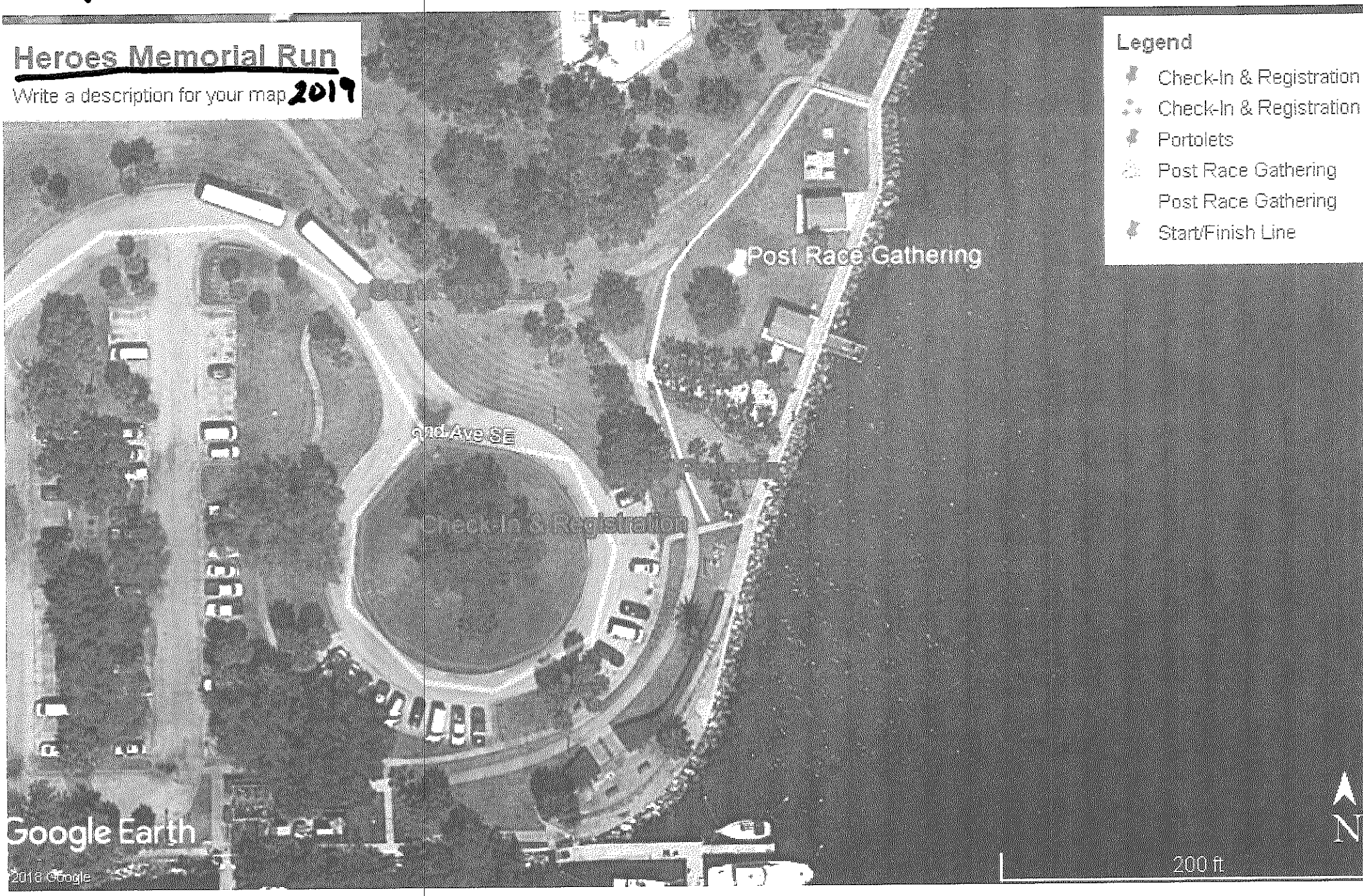
A. In the performance of your ongoing operations; or

B. In connection with your premises owned by or rented to you.

© ISO Properties, Inc., 2004

Venue MAP

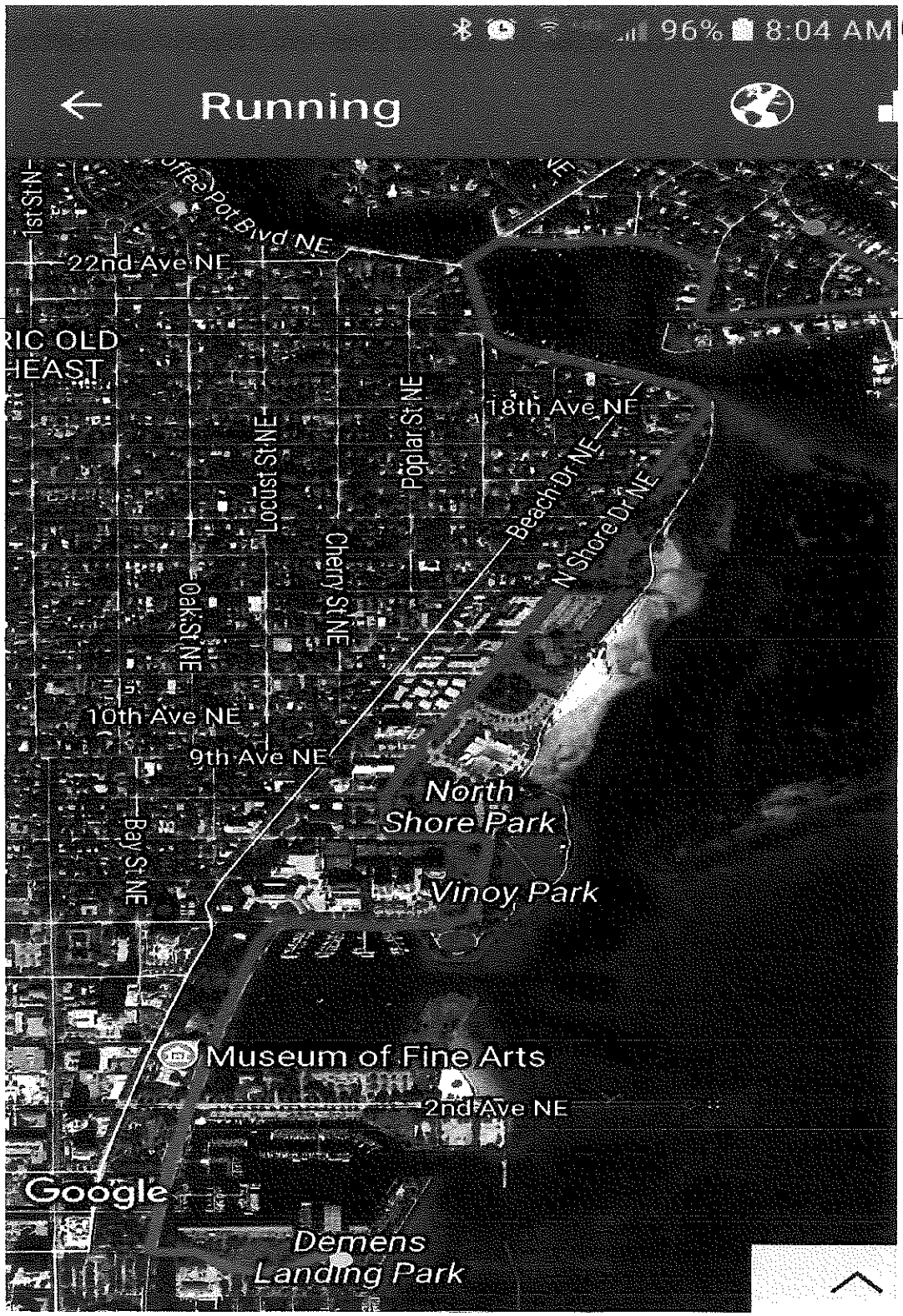
6


Heroes Memorial Run
Write a description for your map 2019
Legend
Check-In & Registration
Check-In & Registration
Portolets
Post Race Gathering
Post Race Gathering
Start/Finish Line
Post Race Gathering
9TH AVE SE
Check-In & Registration
Google Earth
2018 Google
200 ft
N

- Runs start at Demens Landing circle parking Lot & turns Right/North onto Bayshore. 5K runners turn at 12th Ave N.E. 10K runners continue around Coffee Pot Bayou & turn North over Snell Isle bridge, turns Right onto Brightwaters Blvd. and turns runners back the Same route at Aranda Ave N.E

Course MAP

7



Florida Department of State

DIVISION OF CORPORATIONS

Department of State / Division of Corporations / Search Records / Detail By Document Number /

Detail by Entity Name

Florida Not For Profit Corporation
HEROES OF THE ST. PETE POLICE AND FIRE RESCUE, INC.

Filing Information

Document Number	N03000009213
FEI/EIN Number	20-0342484
Date Filed	10/22/2003
State	FL
Status	ACTIVE
Last Event	AMENDED AND RESTATEDARTICLES/NAME CHANGE
Event Date Filed	12/15/2017
Event Effective Date	NONE

Principal Address

C/O GREGORY SHARER & STUART P.A.
100 2ND AVE SOURTH
SUITE 600
ST PETERSBURG, FL 33701

Mailing Address

C/O GREGORY SHARER & STUART P.A.
100 2ND AVE SOURTH
SUITE 600
ST PETERSBURG, FL 33701

Registered Agent Name & Address

NEWMAN, JAMES G
100 2ND AVENUE SOUTH
SUITE 600
ST. PETERSBURG, FL 33701

Name Changed: 10/20/2004

Address Changed: 10/20/2004

Officer/Director Detail

Name & Address

Title Treasurer

NEWMAN, JAMES G
100 2ND AVE SOUTH STE 600
ST PETERSBURG, FL 33701

Title President

NEWMAN, JAMES G
100 -2ND AVENUE SOUTH STE 600
ST. PETERSBURG, FL 33701

Title Secretary

PUNZAK, DAVID
100 - 2ND AVENUE SOUTH STE 600
ST. PETERSBURG, FL 33701

Annual Reports

Report Year	Filed Date
2016	02/04/2016
2017	01/10/2017
2018	02/19/2018

Document Images

02/19/2018 -- ANNUAL REPORT	View image in PDF format
12/15/2017 -- Amended & Restated Articles/Na	View image in PDF format
01/10/2017 -- ANNUAL REPORT	View image in PDF format
02/04/2016 -- ANNUAL REPORT	View image in PDF format
01/09/2015 -- ANNUAL REPORT	View image in PDF format
01/10/2014 -- ANNUAL REPORT	View image in PDF format
01/24/2013 -- ANNUAL REPORT	View image in PDF format
01/06/2012 -- ANNUAL REPORT	View image in PDF format
02/21/2011 -- ANNUAL REPORT	View image in PDF format
01/13/2010 -- ANNUAL REPORT	View image in PDF format
04/27/2009 -- ANNUAL REPORT	View image in PDF format
04/25/2008 -- ANNUAL REPORT	View image in PDF format
02/22/2007 -- ANNUAL REPORT	View image in PDF format
05/08/2006 -- ANNUAL REPORT	View image in PDF format
01/06/2005 -- ANNUAL REPORT	View image in PDF format
10/20/2004 -- REINSTATEMENT	View image in PDF format
08/27/2004 -- Name Change	View image in PDF format
05/12/2004 -- Name Change	View image in PDF format
10/22/2003 -- Domestic Non-Profit	View image in PDF format

st.petersburg

Contract/Permit

Contract #: 25391
Date: 06 Nov 2018

User: JSBENNIN
Status: Firm

HEROES OF THE ST PETE POLICE INC
DAWN PETERS
1212 SEDEEVA CIRCLE S.
CLEARWATER FL 33755 USA

Primary #: (727) 415-1988
Secondary #: ()
Other #: ()

Purpose of Use: HEROES MEMORIAL 5K/10K RUN **Expected:** 500 **Co-Sponsored Event** **Contract Balance** $0.00

Conditions of Use: Insurance Required

Other Information:

Use of beer and wine	Yes
Use of fencing	Yes
Use of liquor	No

Date(s) and Time(s) of Use: **Starting:** Thu 21 Mar 19 06:00 am **Ending:** Sat 23 Mar 19 09:00 pm

Facility/Equipment	Day	Date	Time	Fee	Extra Fee	Tax	Total
Demens Landing Park	Thu	21 Mar 2019	06:00 AM	$0.00	$200.00	$0.00	$200.00
Park		23 Mar 2019	09:00 PM				

Additional Fees:

Extra Fee	Quantity	Charge	Tax	Total
Co-Sponsored Application Fee	1	$30.00	$0.00	$30.00
				$30.00

Extra Fee - Bookings	Hours	Quantity	Charge	Tax	Total
Co-Sponsored Permit Fee	63:00	1	$200.00	$0.00	$200.00
		1	$200.00	$0.00	$200.00

Charges:

Fees	Extra Fees	Tax	Total	Deposit	Total Applied	Contract Balance	Account Balance
$ 0.00	$230.00	$0.00	$230.00	$0.00	$230.00	$0.00	$0.00

Balance of rental due and payable immediately.

Payments:

Date	Amount	Payment Type	Reference	Receipt Number
08 Oct 2018	$230.00	Check	Rental	3173119

Additional Notes:

I have read this Agreement and agree to comply with the terms and conditions set forth in this Agreement. I also understand this Agreement is not final until approved and executed by the Parks and Recreation Superintendent or designee.

By:(Sign Name) _____

(Print Name) **DAWN PETERS**

HEROES OF THE ST PETE POLICE INC
Name of User Organization, If Applicable

CITY OF ST. PETERSBURG, FLORIDA

By:(Sign Name): _____
Parks and Recreation Superintendent

(Print Name) _____
Parks and Recreation Department

Contract #: 25391
Date: 06 Nov 2018

User: JSBENNIN
Status: Firm

Supervisor II / Foreman	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:

The Americans with Disabilities Act (A.D.A.) guarantees equal opportunity for people with disabilities. Special accommodation requests such as sign language interpreters, taped or Braille materials, assistive listening devices, etc., should be made at least one week prior to the activity or program. Individuals using TTD devices, please contact us using the Florida Relay Service at 800-955-8771.

CITY OF ST. PETERSBURG
PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENT APPLICATION

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st. petersburg parks & recreation

Date Received: 9/4/18
Check or Cash:
Application #: 83
Packet: B
Permit #: 25392

Event Title: Second Saturday At Williams Park | Phone No.: 7275202968 | Fax No.: NA

Entity Name: Skyway Historical Tours Of St. Petersburg, LLC | Federal I.D. Number: 465372438

Event Date(s): 2/9/2019 | Location: 350 2nd Ave .No. St. Pete. Fl.

Day 1 of Event: Feb 9th | Time Gates Open: 4:00pm | Ending Time: 10:00 pm

Day 2 of Event: May 11 | Time Gates Open: 4:00pm | Ending Time: 10:00pm

Day 3 of Event: Oct 12 | Time Gates Open: 4:00 pm | Ending Time: 10:00pm

Application Prepared by: William Walker | Phone: 727-520-2968

Title: Event Coordinator | Cell Phone: 727-520-2968

Address: 3429 11th Ave. So. | City: St. Pete | State: Fl | Zip: 33713

Email Address: secondsaturday13@gmail.com

Additional Contact Person: NA | Day Phone: NA

What month/year were you incorporated as nonprofit? 8/2013

List all 501(c)3 entities that will benefit from this event. World Changers Christian Academy

Name of the for-profit entity? World Changers Christian Academy

Describe how this event will contribute to the quality of life in and enhance the image of St. Petersburg.

Second Saturday is a family friendly event wit

Describe what economic benefit and impact this event will bring to St. Petersburg.

By hosting such an event we are planning to have an array of food truck vendors and cultural vendors primarily from our own community to come out and market their services and goods to the hundreds of attendees. By doing so local businesses are gaining more exposure to a wider market base and the local businesses in the immediate area will benefit just from their proximity of the event. Restaurants, store fronts even hotels and local transportation can benefit from this type of event. The Second Saturday event will also showcase over 30 of our city's independent businesses and community organizations, we know that with the continued growth of our communities it is a win for everyone when we can collaborate our efforts.

Each co-sponsored entity must possess liability insurance naming the City of St. Petersburg as an additional insured and secure said insurance in the amount determined by the City.

Does your group presently have liability insurance? ☐ YES ☒ NO How much? NA

Are there plans to sell or distribute beer/wine at your event? ☒ YES ☒ NO

Will there be an admission / registration fee? ☐ YES ☒ NO Advanced Fee: NA Day of: NA

Please provide the website address for your event. www.secondsaturday13.com

Please provide a phone number that can be advertised to the public. 727-520-2968

What is the estimated attendance for this event? Spectators 300 Participants 20 Last Year's Total Attendance 350

Please check the equipment and/or facilities you are requesting.

Recreation Equipment

Showmobile (Yes/No) No

Bleacher(s) needed. Each bleacher approx. 180 people)

Tables (6 ft) # needed 10 Chairs # needed 50

Public Address System NA

# of portable risers needed (4 in. x 8 in. x 16 in. sections) 0

Special Events Facilities

- ☐ Mahaffey Theater
- ☐ Coliseum
- ☐ Sunken Gardens
- ☐ Boyd Hill

☐ Non-City Locations

Which Location?

Williams Park

The following departments may provide and charge for additional services. You will be provided cost estimates in your Co-sponsored Agreement.

POLICE:	Public Safety Personnel, Marine Services
TRAFFIC:	Personnel, Equipment (cones, barricades, no parking signs)
FIRE:	Paramedics, Inspectors
PARKS SERVICES:	Cleanup Personnel, Dumpster(s), Trash Receptacles, Event Site Preparation and Restoration
RECREATION SERVICES:	On-site Presence, Logistics Help, Liaison with Other Ddepartments

Note: The City does not provide tents, Port-O-Lets, or large quantities of tables and chairs.

I certify that the event will be open to all citizens and that individuals will not be barred from participation due to race, creed, color, national origin, sex, age, or physical impairment. I understand that a financial report of the event is due in the Parks and Recreation office within 30 days of the completion of the event. I also understand that the City is to be shown as a co-sponsor on any promotional materials produced for the event. I agree to obtain the required liability insurance and to secure all necessary city/county/state permits/licenses. I further certify that the facts contained in this application are accurate.

Name:	William Walker	Title:	Event Planner	Date:	9/25/2018
Co-Sign:	Gail Harper	Title:	Participant	Date:	9/25/2018

NOTE:

a. **If person/entity preparing this application is not representing a nonprofit entity, the application must be co-signed by someone from a sponsoring nonprofit entity. A copy of the sponsoring entity's 501(c)3 designation must accompany this application.**

b. **If your entity has outstanding financial obligations with any department within the City of St. Petersburg, your application will not be processed until debt if paid.**

c. **Applications lacking information or the required completed appendixes listed below will not be processed.**

PLEASE ATTACH THE FOLLOWING

1. Route map for parade, run, walk, and/or bike event.
2. Site map of event and detail schedule of each day's events including open and close times.
3. Complete Appendix B and Appendix C.
4. Check for $30.00 for co-sponsored application processing (non-refundable).
5. Check for park permit fee. See Appendix A for fee structure.
6. A copy of 501(c)3 designation (if applicable)

FOR FURTHER INFORMATION, PLEASE CALL LYNN GORDON, PARKS & RECREATION MANAGER, 727-893-7766 or EMAIL: StPeteEvents@stpete.org

st.petersburg
www.stpete.org

PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENTS
SUMMARY SHEET

st. petersburg parks & recreation

Review and check all conditions which apply to this event: Note the corresponding obligation for each condition.

Condition		Obligation
☒ Public Invited		General Liability Insurance
☒ Located in Park		Park Permit
☒ Vending Product / Merchandise Sales		Occupational License
☒ Vending Food / Beverage		Health Inspection
☒ Vendors / Exhibitors	How many? 21 - 30 Vendors / Exhibitors	
☐ Vending Beer / Wine		Alcohol Permit Additional insurance Required
☐ Erecting Tents - Larger than 10ft x 12ft	How many?	Temporary Structure Permit
☐ Fence Installation	What type?	Temporary Structure Permit
☐ Other Structures	What structure?	Temporary Structure Permit
☐ Open Flame Food Preparation		Fire Inspection Permit
☐ Pyrotechnics		Fireworks Permit
☐ Require Street Closure		Parade or Street Closure Permit(s)
☒ VIP Area		
☐ Staging	☐ Professional ☐ Showmobile ☐ Other	
☒ Amplified Sound	☒ Performers ☐ Announcement Only	
☐ Security	☐ Daytime - Private ☐ Overnight - Private ☐ Event Time Frame - SPPD	
☐ Sanitary Facilities - Port-O-Lets	Regular Units ☐ Disabled Units ☐ Hand Washing ☐	
☒ Off-site Parking / Shuttle		
☐ Semitruck / Tractor Trailer		

Marketing: Please check all that apply.

☒ Invitations	☐ Radio
☒ Posters / Flyers	☐ Television
☒ Newspaper / Internet	☐ Remote Broadcast

City logo should be used in any promotional materials, posters, flyers, ads, website, public service announcements, and press releases.

Electrical Requirements:

Does your event require any power needs using more than the standard 110/20amp located in the parks? ☐ YES ☒ NO

If YES, check all that apply. ☐ RV'S ☐ Coffee Vendors ☐ Ice Bins ☐ Freezers ☐ Ice Cream Vendors ☒ Catering Trucks ☐ Other:

Please explain the details of the above items checked. Tell us how much and what type of power they would require.

There will be food truck vendors, however they shouldn't require any electrical power. The only power we would need would be the stage area for the band. And that would be 110 only

Will you supply your own generators? ☒ YES ☐ NO

Will your event have a licensed electrician on-site during the event? ☐ YES ☒ NO If YES, who?

Will your event be requesting any variances from City policies or procedures? If YES, please explain.

No

If City permits, licenses, or services are required for event, who will pay for them?

Name: WilliamWalker Phone: 7275202968

Address (including zip): 3429 11th Ave. No S. Pete. Fl 33713

Type of music, # of stages, and # of bands.

An array of different genres of music each month on the main stage.

List Vending Products. Name & Provider.

This event host a variety of Multi-cultural vendors with an array of different products.

For Use of Beer/Wine - Please provide name, address and phone number of the sponsoring 501(c)3 or catering company.

NA

Explain subject/purpose of all speeches/demonstrations which will occur.

NA

Discuss your load in/load out parking needs, include times and dates.

We will set up at 3:00pm for each event. And would need to park either on 4th street between 1st and 2nd Ave, N. or on 2nd Ave between 3rd and 4th street. Also our food trucks will be parked along the street on the 3rd street side, or the could park on the 4th street side. Which ever is most convenient.

Other Comments: Please describe your fee structure.

I plan on charging each food truck vendor $70.00 a month until I can estimate how many attendees will be there. The Multi-cultural vendors will be charged $60.00 a month. We want all vendors have success during this event, and we will charge for space according to crowd size.

Other comments:

I have been promoting events in downtown St. Petersburg for the past 5 years and has been very successful in each. We are in the process of pioneering different experiences for the downtown area that people can enjoy in a safe, friendly and professional environment.

I represent and warrant that the purpose of the proposed activity/event and conduct of the sponsor(s) and the participants shall conform to all requirements of law and all ordinances of the State of Florida, Pinellas County, and the City of St. Petersburg including, but not limited to, City noise ordinances and Parks and Recreation Department Policies and Procedures. I acknowledge that failure to observe such laws, ordinances, or policies and procedures will result in an immediate cancellation of the event and all permits.

WITHOUT LIMITING THE GENERALITY OF THE FOREGOING, I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE PARKS AND RECREATION DEPARTMENT POLICIES AND PROCEDURES PERTAINING TO THE USE OF PARKS AND THE PARK RULES SET FORTH IN ARTICLE II, CHAPTER 21, OF THE ST. PETERSBURG CITY CODE, INCLUDING BUT NOT LIMITED TO THE INDEMNIFICATION AND INSPECTION OBLIGATIONS ASSUMED BY ME AND THE PERSON OR ENTITY ON WHOSE BEHALF THIS APPLICATION IS BEING MADE.

I certify that the facts contained in this application are accurate.

Name: William Walker Title: Event Coordinator Date: 9-25-2018

Appendix A

Co-Sponsored Event Park Fee Structure

* Events in Vinoy Park will be assessed $300.00 per event day (e.g.,1 day event = $300.00, 2 days = $600.00, 3 days or more = $900.00.) This includes the $30.00 park permit fee.

* Events in any other park will be assessed $200.00 per event day (e.g., 1 day event = $200.00, 2 days = $400.00, 3 or more days = $600.00). This includes the $30.00 park permit fee.

* The above fees will be due at the time you submit your application plus the $30.00 co-sponsored application fee.

* All co-sponsored event applications must be submitted at least 6 month prior to the event.

* Any application for a co-sponsored event submitted inside the six (6) month time frame will be assessed a non refundable $1,200.00 late fee.

* **The City requires payment in advance for all City services estimated and/or provided for first time events and one of a kind nonrecurring events.**

* **Payment will be required at least ten (15) business days prior to the start of the event and shall be in the form of cash, certified check, or an irrevocable bank letter of credit.**

* **All first time entities requesting events will be required to complete a credit application.**

Appendix B
President or CEO
Responsible Party Information

Please complete the information below for each responsible party.

Name of the **Nonprofit** Corporation: World Changers Christian Academy

Name of Responsible Party (President or CEO ONLY): Gail Harper

Title of Responsible Party: owner

Physical Address of Responsible Party: 2255 Florida Avenue So. St. Petersburg, Fl 33705

Phone Number of Responsible Party: 7275202013

Email Address of Responsible Party: walkerr70@yahoo.com

Nonprofit (Employee Identification Number): 46-1239344

Name of the **For-profit** Corporation: Skyway Historical Tours

Name of Responsible Party (President or CEO ONLY): William Walker

Title of Responsible Party: Owner

Physical Address of Responsible Party: 2255 Florida Ave So. St. Petersburg, Fl 33705

Phone Number of Responsible Party: 727-520-2968

Email Address of Responsible Party: secondsaturday13@gmail.com

For-profit (Employee Identification Number) 46-537438

Please include a copy of the the current IRS Nonprofit Affidavit / For Profit

What method of invoicing would your organization prefer?

☒ BY Mail

Contact Name: William Walker

Address: 2255 Florida Ave . So

City, State, Zip: St. Pete. F; 33705

☐ BY EMAIL

Email Address:

APPENDIX C
STATEMENT OF REVENUE AND EXPENSES FORM
PRIOR YEAR'S EVENT
(Must be completed)

Name of Event: Second Saturday
Date(s) of Event: May thru July - 2018

I. REVENUE SOURCES (attach sheet if more space is needed)

		Amount
1.	Vendors-May	1200.00
2.	Vendor- June	1250.00
3.	Vendor-July	1500.00
4		
5.		
6.		
7.		
8.		
	TOTAL GROSS REVENUE	

II. EXPENSES (attach sheet if more space is needed)

1.	Entertainment-May	2000.00
2.	Park Fee- May	1600.00
3.	Movie and Equipment-May	950.00
4	Entertainment-June	1500.00
5.	Park Fee- June	1600.00
6.	Movie and Equipment June	950.00
7.	Entertainment-July	3000.00
8.	Park Fee- July	
9.	Movie and Equipment July	950.00
10.		
11.		
12.		
	TOTAL OPERATING EXPENSES	
	TOTAL NET INCOME	

III. ALLOCATION OF NET INCOME (attach sheet if more space is needed)

1.		
2.		
3.		
4.		
5.		
6.		
	TOTAL ALLOCATION OF NET INCOME	

Prepared by: William Walker Date: 10/24/2018

Print Application

Submit Application by Email

Detail by Entity Name

Florida Limited Liability Company
SKYWAY HISTORICAL TOURS OF ST. PETERSBURG, LLC

Filing Information

Document Number	L14000059484
FEI/EIN Number	46-5372438
Date Filed	04/11/2014
Effective Date	04/07/2014
State	FL
Status	ACTIVE

Principal Address

3429 11TH AVENUE NORTH
SAINT PETERSBURG, FL 33713

Mailing Address

2255 FLORIDA AVENUE SOUTH
SAINT PETERSBURG, FL 33705

Registered Agent Name & Address

WILLIAMS, MARCINA
3429 11TH AVENUE NORTH
SAINT PETERSBURG, FL 33713

Address Changed: 04/30/2015

Authorized Person(s) Detail

Name & Address

Title MGR

WALKER, WILLIAM C
2255 FLORIDA AVENUE SOUTH
SAINT PETERSBURG, FL 33713

Annual Reports

Report Year	Filed Date
2016	04/01/2016
2017	04/27/2017
2018	04/30/2018

Document Images

04/30/2018 -- ANNUAL REPORT	View image in PDF format
04/27/2017 -- ANNUAL REPORT	View image in PDF format
04/01/2016 -- ANNUAL REPORT	View image in PDF format
04/30/2015 -- ANNUAL REPORT	View image in PDF format
04/11/2014 -- Florida Limited Liability	View image in PDF format

st.petersburg

Contract/Permit

Contract #: 25392
Date: 06 Nov 2018

User: JSBENNIN
Status: Firm

SKYWAY HISTORICAL TOURS OF ST PETE
WILLIAM WALKER
3429 11TH AVE N
ST PETERSBURG FL 33713 USA

Primary #: (727)
Secondary #: (727)
Other #: ()

Purpose of Use: SECOND SATURDAY AT WILLIAMS PARK **Expected:** 300 **Co-Sponsored Event**

Contract Balance $230.00

Conditions of Use: Insurance Required

Other Information:

Use of beer and wine	No
Use of fencing	No
Use of liquor	No

Date(s) and Time(s) of Use: **Starting:** Sat 11 May 19 06:00 am **Ending:** Sat 11 May 19 11:00 pm

Facility/Equipment	Day	Date	Time	Fee	Extra Fee	Tax	Total
Williams Park	Sat	11 May 2019	06:00 AM	$0.00	$200.00	$0.00	$200.00
Park			11:00 PM				

Additional Fees:

Extra Fee	Quantity	Charge	Tax	Total
Co-Sponsored Application Fee	1	$30.00	$0.00	$30.00
				$30.00

Extra Fee - Bookings	Hours	Quantity	Charge	Tax	Total
Co-Sponsored Permit Fee	17:00	1	$200.00	$0.00	$200.00
		1	$200.00	$0.00	$200.00

Charges:

Fees	Extra Fees	Tax	Total	Deposit	Total Applied	Contract Balance	Account Balance
$ 0.00	$230.00	$0.00	$230.00	$0.00	$0.00	$230.00	$150.00

Rental charges are due according to the following schedule:

Date	Amount
Saturday, Apr 27,2019	$230.00

Payments:

Additional Notes:

I have read this Agreement and agree to comply with the terms and conditions set forth in this Agreement. I also understand this Agreement is not final until approved and executed by the Parks and Recreation Superintendent or designee.

By:(Sign Name) _____

(Print Name) **WILLIAM WALKER**

SKYWAY HISTORICAL TOURS OF ST PETE
Name of User Organization, If Applicable

CITY OF ST. PETERSBURG, FLORIDA

By:(Sign Name): _____
Parks and Recreation Superintendent

(Print Name) _____
Parks and Recreation Department

Supervisor II / Foreman	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:

The Americans with Disabilities Act (A.D.A.) guarantees equal opportunity for people with disabilities. Special accommodation requests such as sign language interpreters, taped or Braille materials, assistive listening devices, etc., should be made at least one week prior to the activity or program. Individuals using TTD devices, please contact us using the Florida Relay Service at 800-955-8771.

CITY OF ST. PETERSBURG
PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENT APPLICATION

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www.stpete.org

st. petersburg parks & recreation

Date Received: 10/4/18
Check or Cash:
Application #: 84
Packet: C
Permit #: 25393

Event Title: Tampa Bay Music Festival | Phone No.: 727-600-4257 | Fax No.:

Entity Name: Burg Style Entertainment | Federal I.D. Number: 35-2445509

Event Date(s): May 3-4 or June 14-15 | Location: Vinoy Park

Day 1 of Event: Set-up | Time Gates Open: 8:00 am | Ending Time: 5:00 pm

Day 2 of Event: Event Day | Time Gates Open: 1:00 pm | Ending Time: 10:00 pm

Day 3 of Event: | Time Gates Open: | Ending Time:

Application Prepared by: Freddie Simmons III | Phone: 727-600-4257

Title: CEO | Cell Phone: 727-600-4257

Address: 4326 13th Avenue South | City: St. Petersburg | State: Fl | Zip: 33711

Email Address: burgstyleentertainment@yahoo.com

Additional Contact Person: | Day Phone:

What month/year were you incorporated as nonprofit?

List all 501(c)3 entities that will benefit from this event.

Name of the for-profit entity? Burg Style Entertainment

Describe how this event will contribute to the quality of life in and enhance the image of St. Petersburg.

The Music Festival will bring live entertainment to St. Petersburg and draw all surrounding counties together to enjoy great music. The Music Festival will help provide jobs to local residents. Burg Style Entertainment has been providing quality entertainment to the Tampa Bay area for numerous years to include the Tampa Sundome, and Straz Center. We look forward to create an annual event in St. Petersburg to draw attention to the City of St. Petersburg.

Describe what economic benefit and impact this event will bring to St. Petersburg.

The Music Festival will help employ 50 to100 City of St. Petersburg residents.

Each co-sponsored entity must possess liability insurance naming the City of St. Petersburg as an additional insured and secure said insurance in the amount determined by the City.

Does your group presently have liability insurance? ☐ YES ☒ NO How much?

Are there plans to sell or distribute beer/wine at your event? ☒ YES ☐ NO

Will there be an admission / registration fee? ☒ YES ☐ NO Advanced Fee: $40.00 Day of: $50.00

Please provide the website address for your event. burgstyleentertainment.net

Please provide a phone number that can be advertised to the public. 727-600-4257

What is the estimated attendance for this event? Spectators 4000 Participants 200 Last Year's Total Attendance

Please check the equipment and/or facilities you are requesting.

Recreation Equipment

Showmobile (Yes/No) No

Bleacher(s) needed. Each bleacher approx. 180 people) NA

Tables (6 ft) # needed 20 Chairs # needed 100

Public Address System NA

# of portable risers needed (4 in. x 8 in. x 16 in. sections) NA

Special Events Facilities

- ☐ Mahaffey Theater
- ☐ Coliseum
- ☐ Sunken Gardens
- ☐ Boyd Hill

☐ Non-City Locations

Which Location?

The following departments may provide and charge for additional services. You will be provided cost estimates in your Co-sponsored Agreement.

POLICE:	Public Safety Personnel, Marine Services
TRAFFIC:	Personnel, Equipment (cones, barricades, no parking signs)
FIRE:	Paramedics, Inspectors
PARKS SERVICES:	Cleanup Personnel, Dumpster(s), Trash Receptacles, Event Site Preparation and Restoration
RECREATION SERVICES:	On-site Presence, Logistics Help, Liaison with Other Ddepartments

Note: The City does not provide tents, Port-O-Lets, or large quantities of tables and chairs.

I certify that the event will be open to all citizens and that individuals will not be barred from participation due to race, creed, color, national origin, sex, age, or physical impairment. I understand that a financial report of the event is due in the Parks and Recreation office within 30 days of the completion of the event. I also understand that the City is to be shown as a co-sponsor on any promotional materials produced for the event. I agree to obtain the required liability insurance and to secure all necessary city/county/state permits/licenses. I further certify that the facts contained in this application are accurate.

Name:	Freddie Simmons	Title:	CEO	Date:	10/12/18
Co-Sign:		Title:		Date:	

NOTE:

a. **If person/entity preparing this application is not representing a nonprofit entity, the application must be co-signed by someone from a sponsoring nonprofit entity. A copy of the sponsoring entity's 501(c)3 designation must accompany this application.**

b. **If your entity has outstanding financial obligations with any department within the City of St. Petersburg, your application will not be processed until debt if paid.**

c. **Applications lacking information or the required completed appendixes listed below will not be processed.**

PLEASE ATTACH THE FOLLOWING

1. Route map for parade, run, walk, and/or bike event.
2. Site map of event and detail schedule of each day's events including open and close times.
3. Complete Appendix B and Appendix C.
4. Check for $30.00 for co-sponsored application processing (non-refundable).
5. Check for park permit fee. See Appendix A for fee structure.
6. A copy of 501(c)3 designation (if applicable)

FOR FURTHER INFORMATION, PLEASE CALL LYNN GORDON, PARKS & RECREATION MANAGER, 727-893-7766 or EMAIL: StPeteEvents@stpete.org

st.petersburg
www.stpete.org

PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENTS
SUMMARY SHEET

st. petersburg parks & recreation

Review and check all conditions which apply to this event: Note the corresponding obligation for each condition.

Condition		Obligation
☒ Public Invited		General Liability Insurance
☒ Located in Park		Park Permit
☒ Vending Product / Merchandise Sales		Occupational License
☒ Vending Food / Beverage		Health Inspection
☒ Vendors / Exhibitors	How many? 20-30	
☒ Vending Beer / Wine		Alcohol Permit Additional insurance Required
☒ Erecting Tents - Larger than 10ft x 12ft	How many? 8	Temporary Structure Permit
☒ Fence Installation	What type? Standard Above Ground	Temporary Structure Permit
☐ Other Structures	What structure?	Temporary Structure Permit
☐ Open Flame Food Preparation		Fire Inspection Permit
☐ Pyrotechnics		Fireworks Permit
☒ Require Street Closure		Parade or Street Closure Permit(s)
☒ VIP Area		
☒ Staging	☒ Professional ☐ Showmobile ☐ Other	
☒ Amplified Sound	☒ Performers ☐ Announcement Only	
☐ Security	☐ Daytime - Private ☒ Overnight - Private ☐ Event Time Frame - SPPD	
☒ Sanitary Facilities - Port-O-Lets	Regular Units X Disabled Units X Hand Washing X	
☐ Off-site Parking / Shuttle		
☐ Semitruck / Tractor Trailer		

Marketing: Please check all that apply.

☐ Invitations	☒ Radio
☒ Posters / Flyers	☒ Television
☒ Newspaper / Internet	☐ Remote Broadcast

City logo should be used in any promotional materials, posters, flyers, ads, website, public service announcements, and press releases.

Electrical Requirements:

Does your event require any power needs using more than the standard 110/20amp located in the parks? ☐ YES ☐ NO

If YES, check all that apply. ☒ RV'S ☐ Coffee Vendors ☒ Ice Bins ☒ Freezers ☐ Ice Cream Vendors ☐ Catering Trucks ☐ Other:

Please explain the details of the above items checked. Tell us how much and what type of power they would require.

There will be RV's used for the dressing room for the artist, power will be needed to power the RV's.

Will you supply your own generators? ☐ YES ☒ NO

Will your event have a licensed electrician on-site during the event? ☐ YES ☒ NO If YES, who?

Will your event be requesting any variances from City policies or procedures? If YES, please explain.

N/A

If City permits, licenses, or services are required for event, who will pay for them?

Name: Freddie Simmons Phone: 727-600-4257

Address (including zip): 4326 13th Avenue South

Type of music, # of stages, and # of bands.

R&B Artist

List Vending Products. Name & Provider.

Local Food Truck Vendors

For Use of Beer/Wine - Please provide name, address and phone number of the sponsoring 501(c)3 or catering company.

TBD

Explain subject/purpose of all speeches/demonstrations which will occur.

NA

Discuss your load in/load out parking needs, include times and dates.

The load in will be one day prior to the event.

Other Comments: Please describe your fee structure.

General Admission	$40.00-$50.00
Preferred Admission	$60.00-$70.00
V.I.P	$75.00-$85.00

Other comments:

I represent and warrant that the purpose of the proposed activity/event and conduct of the sponsor(s) and the participants shall conform to all requirements of law and all ordinances of the State of Florida, Pinellas County, and the City of St. Petersburg including, but not limited to, City noise ordinances and Parks and Recreation Department Policies and Procedures. I acknowledge that failure to observe such laws, ordinances, or policies and procedures will result in an immediate cancellation of the event and all permits.

WITHOUT LIMITING THE GENERALITY OF THE FOREGOING, I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE PARKS AND RECREATION DEPARTMENT POLICIES AND PROCEDURES PERTAINING TO THE USE OF PARKS AND THE PARK RULES SET FORTH IN ARTICLE II, CHAPTER 21, OF THE ST. PETERSBURG CITY CODE, INCLUDING BUT NOT LIMITED TO THE INDEMNIFICATION AND INSPECTION OBLIGATIONS ASSUMED BY ME AND THE PERSON OR ENTITY ON WHOSE BEHALF THIS APPLICATION IS BEING MADE.

I certify that the facts contained in this application are accurate.

Name: Freddie Simmons Title: CEO Date: 10/12/18

Appendix A

Co-Sponsored Event Park Fee Structure

* Events in Vinoy Park will be assessed $300.00 per event day (e.g.,1 day event = $300.00, 2 days = $600.00, 3 days or more = $900.00.) This includes the $30.00 park permit fee.

* Events in any other park will be assessed $200.00 per event day (e.g., 1 day event = $200.00, 2 days = $400.00, 3 or more days = $600.00). This includes the $30.00 park permit fee.

* The above fees will be due at the time you submit your application plus the $30.00 co-sponsored application fee.

* All co-sponsored event applications must be submitted at least 6 month prior to the event.

* Any application for a co-sponsored event submitted inside the six (6) month time frame will be assessed a non refundable $1,200.00 late fee.

* **The City requires payment in advance for all City services estimated and/or provided for first time events and one of a kind nonrecurring events.**

* **Payment will be required at least ten (10) business days prior to the start of the event and shall be in the form of cash, certified check, or an irrevocable bank letter of credit.**

* **All first time entities requesting events will be required to complete a credit application.**

Appendix B
President or CEO
Responsible Party Information

Please complete the information below for each responsible party.

Name of the **Nonprofit** Corporation:

Name of Responsible Party (President or CEO ONLY):

Title of Responsible Party:

Physical Address of Responsible Party:

Phone Number of Responsible Party:

Email Address of Responsible Party:

Nonprofit (Employee Identification Number):

Name of the **For-profit** Corporation:

Name of Responsible Party (President or CEO ONLY):

Title of Responsible Party:

Physical Address of Responsible Party:

Phone Number of Responsible Party:

Email Address of Responsible Party:

For-profit (Employee Identification Number)

Please include a copy of the the current IRS Nonprofit Affidavit / For Profit

What method of invoicing would your organization prefer?

☐ BY Mail

Contact Name

Address

City, State, Zip

☒ BY EMAIL

Email Address: burgstyleentertainment@yahoo.com

APPENDIX C
STATEMENT OF REVENUE AND EXPENSES FORM
PRIOR YEAR'S EVENT
(Must be completed)

Name of Event:

Date(s) of Event: -

I. REVENUE SOURCES (attach sheet if more space is needed)

		Amount
1.		
2.		
3.		
4		
5.		
6.		
7.		
8.		
	TOTAL GROSS REVENUE	

II. EXPENSES (attach sheet if more space is needed)

1.		
2.		
3.		
4		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
	TOTAL OPERATING EXPENSES	
	TOTAL NET INCOME	

III. ALLOCATION OF NET INCOME (attach sheet if more space is needed)

1.		
2.		
3.		
4.		
5.		
6.		
	TOTAL ALLOCATION OF NET INCOME	

Prepared by: Date:

Print Application

Submit Application by Email

BUDGET		**AT 100% CAPACITY**				$ 150.00	200		V.I.P
Tampa Bay Music Festival						$ 75.00	300		Preferred
						$ 40.00	4000		General
Estimated	FACILITY:	Vinoy Park							
Show Expenses	CITY:	St.Petersburg, Florida							
	Date:		Paid	4500					
			Comps/Trade	500				$ -	
			Total Attendance	5000		**Total Tickets Sold**	4000	**$ 212,500.00**	
Expenses		**Building**	**EVENT**	**Total**		Sponsorship		**$ 15,000.00**	
Building		$ -	$ -	$ -		Vending		**$ 5,000.00**	
Ticketmaster		$ -		$ -		Beverages		**$ 15,000.00**	
Box office Fee		$ -		$ -		Gross Show Profits		**$ 243,000.00**	
Venue Rental		$ 300.00		$ 300.00					
Ticket set up		$ -		$ -					
Box office Commision	CAP	$ -		$ -					
Staffing/usher		$ -	$ 1,000.00	$ 1,000.00					
Credit Card(Fees)		$ -	$ 1,000.00	$ 1,000.00					
Talent		$ -	$ 120,000.00	$ 120,000.00		Event Expenses		**$ 187,700.00**	
Production		$ -		$ -		Show Net Profits/Losses			
Airfares				$ -					
Advertising				$ -					
TV Production				$ -					
RADIO SPOT			$ 15,000.00	$ 15,000.00					
TV Spots			$ 3,000.00	$ 3,000.00		**Net Profit Return**		**$ 55,300.00**	
Flyers/Poster			$ 1,500.00	$ 1,500.00		**Total Profit**		**$ 55,300.00**	
Street Team			$ 750.00	$ 750.00					
Paper Print Media			$ 3,000.00	$ 3,000.00					
Social Media/E- Blast		$ -	$ 850.00	$ 850.00					
Insurance			$ 950.00	$ 950.00					
Equip Rental		$ -	$ 1,000.00	$ 1,000.00					
Production Backline		$ -	$ 750.00	$ 750.00					
Hotels			$ 4,500.00	$ 4,500.00					
Rider Requirements			$ -	$ -					
Ascap/Bmi				$ -					
Catering/Food			$ 1,100.00	$ 1,100.00					
stagehands		$ -		$ -					
Fire Marshal		$ -							
Police		$ -	$ 10,000.00	$ 10,000.00					
Security		$ -	$ 3,500.00	$ 3,500.00					
LA Hires (Retainer)									
Parmedics			$ 3,000.00	$ 3,000.00					
Prod.(sound/lights)		$ -	$ 14,000.00	$ 14,000.00					
Follow Spots		$ -		$ -					
Giveaways			$ 1,000.00	$ 1,000.00					
Rent A Cars			$ 1,500.00	$ 1,500.00					
Totals				$ 187,700.00					

Florida Department of State

DIVISION OF CORPORATIONS

Detail by Entity Name

Florida Limited Liability Company
BURGSTYLE ENTERTAINMENT LLC

Filing Information

Document Number	L12000051113
FEI/EIN Number	35-2445509
Date Filed	04/16/2012
Effective Date	04/15/2012
State	FL
Status	ACTIVE

Principal Address

4326 13th avenue south
St.Petersburg, FL 33711

Changed: 04/29/2016

Mailing Address

4326 13th avenue south
St.Petersburg, FL 33711

Changed: 04/29/2016

Registered Agent Name & Address

SIMMONS, FREDDIE LIII
4326 13th avenue south
St.Petersburg, FL 33711

Address Changed: 04/30/2017

Authorized Person(s) Detail

Name & Address

Title MGRM

SIMMONS, FREDDIE III
4326 13th avenue south
St.Petersburg, FL 33711

Annual Reports

Report Year	Filed Date
2016	04/29/2016
2017	04/30/2017

2018 04/30/2018

Document Images

04/30/2018 -- ANNUAL REPORT	View image in PDF format
04/30/2017 -- ANNUAL REPORT	View image in PDF format
04/29/2016 -- ANNUAL REPORT	View image in PDF format
04/30/2015 -- ANNUAL REPORT	View image in PDF format
04/30/2014 -- ANNUAL REPORT	View image in PDF format
04/29/2013 -- ANNUAL REPORT	View image in PDF format
04/16/2012 -- Florida Limited Liability	View image in PDF format

st.petersburg

Contract/Permit

Contract #: 25393
Date: 06 Nov 2018

User: JSBENNIN
Status: Firm

BURG STYLE ENTERTAINMENT
FREDDIE SIMMONS III
4326 13TH AVE S
ST PETERSBURG FL 33711 USA

Primary #: (727) 600-4257
Secondary #: (727)
Other #: ()

Purpose of Use: TAMPA BAY MUSIC FESTIVAL

Expected: 4,000

Co-Sponsored Event

Contract Balance $330.00

Conditions of Use: Insurance Required

Other Information:

Use of beer and wine	Yes
Use of fencing	Yes
Use of liquor	No

Date(s) and Time(s) of Use: **Starting: Tue 11 Jun 19 06:00 am** **Ending: Tue 18 Jun 19 09:00 pm**

Facility/Equipment	Day	Date	Time	Fee	Extra Fee	Tax	Total
Vinoy Park	Tue	11 Jun 2019	06:00 AM	$0.00	$300.00	$0.00	$300.00
Vinoy Park		18 Jun 2019	09:00 PM				

Additional Fees:

Extra Fee	Quantity	Charge	Tax	Total
Co-Sponsored Application Fee	1	$30.00	$0.00	$30.00
				$30.00

Extra Fee - Bookings	Hours	Quantity	Charge	Tax	Total
Co-Sponsored Permit Fee (Vinoy)	183:00	1	$300.00	$0.00	$300.00
		1	$300.00	$0.00	$300.00

Charges:

Fees	Extra Fees	Tax	Total	Deposit	Total Applied	Contract Balance	Account Balance
$ 0.00	$330.00	$0.00	$330.00	$0.00	$0.00	$330.00	$330.00

Balance of rental due and payable immediately.

Payments:

Additional Notes:

I have read this Agreement and agree to comply with the terms and conditions set forth in this Agreement. I also understand this Agreement is not final until approved and executed by the Parks and Recreation Superintendent or designee.

By:(Sign Name) _____

(Print Name) **FREDDIE SIMMONS III**

BURG STYLE ENTERTAINMENT
Name of User Organization, If Applicable

CITY OF ST. PETERSBURG, FLORIDA

By:(Sign Name): _____
Parks and Recreation Superintendent

(Print Name) _____
Parks and Recreation Department

Supervisor II / Foreman	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:

The Americans with Disabilities Act (A.D.A.) guarantees equal opportunity for people with disabilities. Special accommodation requests such as sign language interpreters, taped or Braille materials, assistive listening devices, etc., should be made at least one week prior to the activity or program. Individuals using TTD devices, please contact us using the Florida Relay Service at 800-955-8771.

CITY OF ST. PETERSBURG
PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENT APPLICATION

st.petersburg
www.stpete.org

st. petersburg parks & recreation

Date Received: 11-6-18
Check or Cash:
Application #: 85
Packet: C
Permit #: 25407

Event Title: Community Festival
Phone No.: 7273272081
Fax No.: 727.327.1672
Entity Name: Pinellas County Urban League
Federal I.D. Number: 59665523
Event Date(s): April 13, 2019
Location: Campbell's Park
Day 1 of Event: April 13, 2019 Time Gates Open: 9:00am Ending Time: 2:00pm
Day 2 of Event: Time Gates Open: Ending Time:
Day 3 of Event: Time Gates Open: Ending Time:

Application Prepared by: Michael J. Boykins, Sr.
Phone: 7273187730
Title: Director
Cell Phone: 7273187730
Address: 333 31st Street North
City: St. Petersburg State: FL Zip: 33713
Email Address: mboykins@pcul.org
Additional Contact Person: Charlotte Anderson
Day Phone: 7273272081
What month/year were you incorporated as nonprofit? 1977
List all 501(c)3 entities that will benefit from this event. N/A
Name of the for-profit entity? N/A

Describe your event with details.

The Community Festival is an event put on by the Pinellas County Urban Leagues Crime Prevention program. The purpose of the event is to bridge the gap between community residents and law enforcement through direct interaction at the event. The event invites different community agencies and resources to take part in providing information to the community. There is food and entertainment provided throughout the event. The event is free to the public.

Describe what economic benefit and impact this event will bring to St. Petersburg.

The event will enhance relations between the community & law enforcement, while providing residents with information related to the various resources in the community.

Each co-sponsored entity must possess liability insurance naming the City of St. Petersburg as an additional insured and secure said insurance in the amount determined by the City.

Does your group presently have liability insurance? ☒ YES ☐ NO How much? 1,000,000.00
Are there plans to sell or distribute beer/wine at your event? ☐ YES ☒ NO
Will there be an admission / registration fee? ☐ YES ☒ NO Advanced Fee: Day of:
Please provide the website address for your event. pcul.org
Please provide a phone number that can be advertised to the public. 727.327.2081
What is the estimated attendance for this event? Spectators 300 Participants 150 Last Year's Total Attendance 425

Please check the equipment and/or facilities you are requesting.

Recreation Equipment

Showmobile (Yes/No) yes

Bleacher(s) needed. Each bleacher approx. 180 people)

Tables (6 ft) # needed 35 Chairs # needed 50

Public Address System

# of portable risers needed (4 in. x 8 in. x 16 in. sections)

Special Events Facilities

- ☐ Mahaffey Theater
- ☐ Coliseum
- ☐ Sunken Gardens
- ☐ Boyd Hill

☐ Non-City Locations

Which Location?

The following departments may provide and charge for additional services. You will be provided cost estimates in your Co-sponsored Agreement.

POLICE:	Public Safety Personnel, Marine Services
TRAFFIC:	Personnel, Equipment (cones, barricades, no parking signs)
FIRE:	Paramedics, Inspectors
PARKS SERVICES:	Cleanup Personnel, Dumpster(s), Trash Receptacles, Event Site Preparation and Restoration
RECREATION SERVICES:	On-site Presence, Logistics Help, Liaison with Other Ddepartments

Note: The City does not provide tents, Port-O-Lets, or large quantities of tables and chairs.

I certify that the event will be open to all citizens and that individuals will not be barred from participation due to race, creed, color, national origin, sex, age, or physical impairment. I understand that a financial report of the event is due in the Parks and Recreation office within 30 days of the completion of the event. I also understand that the City is to be shown as a co-sponsor on any promotional materials produced for the event. I agree to obtain the required liability insurance and to secure all necessary city/county/state permits/licenses. I further certify that the facts contained in this application are accurate.

Name:	Michael J. Boykins, Sr.	Title:	Director	Date:	11/6/18
Co-Sign:		Title:		Date:	

NOTE:

a. **If person/entity preparing this application is not representing a nonprofit entity, the application must be co-signed by someone from a sponsoring nonprofit entity. A copy of the sponsoring entity's 501(c)3 designation must accompany this application.**

b. **If your entity has outstanding financial obligations with any department within the City of St. Petersburg, your application will not be processed until debt if paid.**

c. **Applications lacking information or the required completed appendixes listed below will not be processed.**

PLEASE ATTACH THE FOLLOWING

1. Route map for parade, run, walk, and/or bike event.
2. Site map of event and detail schedule of each day's events including open and close times.
3. Complete Appendix B and Appendix C.
4. Check for $30.00 for co-sponsored application processing (non-refundable).
5. Check for park permit fee. See Appendix A for fee structure.
6. A copy of 501(c)3 designation (if applicable)

FOR FURTHER INFORMATION, PLEASE CALL LYNN GORDON, PARKS & RECREATION MANAGER, 727-893-7766 or EMAIL: StPeteEvents@stpete.org

PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENTS
SUMMARY SHEET

Review and check all conditions which apply to this event: Note the corresponding obligation for each condition.

Condition		Obligation
☒ Public Invited		General Liability Insurance
☒ Located in Park		Park Permit
☐ Vending Product / Merchandise Sales		Occupational License
☐ Vending Food / Beverage		Health Inspection
☒ Vendors / Exhibitors	How many? 21 - 30 Vendors / Exhibitors	
☐ Vending Beer / Wine		Alcohol Permit Additional Insurance Required
☐ Erecting Tents - Larger than 10ft x 12ft	How many?	Temporary Structure Permit
☐ Fence Installation	What type?	Temporary Structure Permit
☐ Other Structures	What structure?	Temporary Structure Permit
☐ Open Flame Food Preparation		Fire Inspection Permit
☐ Pyrotechnics		Fireworks Permit
☐ Require Street Closure		Parade or Street Closure Permit(s)
☐ VIP Area		
☒ Staging	☐ Professional ☒ Showmobile ☐ Other	
☒ Amplified Sound	☒ Performers ☐ Announcement Only	
☐ Security	☐ Daytime - Private ☐ Overnight - Private ☐ Event Time Frame - SPPD	
☐ Sanitary Facilities - Port-O-Lets	Regular Units Disabled Units Hand Washing	
☐ Off-site Parking / Shuttle		
☐ Semitruck / Tractor Trailer		

Marketing: Please check all that apply.

- ☐ Invitations
- ☒ Posters / Flyers
- ☒ Newspaper / Internet
- ☐ Radio
- ☐ Television
- ☐ Remote Broadcast

City logo should be used in any promotional materials, posters, flyers, ads, website, public service announcements, and press releases.

Electrical Requirements:

Does your event require any power needs using more than the standard 110/20amp located in the parks? ☐ YES ☒ NO

If YES, check all that apply. ☐ RV'S ☐ Coffee Vendors ☐ Ice Bins ☐ Freezers ☐ Ice Cream Vendors ☐ Catering Trucks ☐ Other:

Please explain the details of the above items checked. Tell us how much and what type of power they would require.

N/A

Will you supply your own generators? ☐ YES ☒ NO

Will your event have a licensed electrician on-site during the event? ☐ YES ☒ NO If YES, who?

Will your event be requesting any variances from City policies or procedures? If YES, please explain.

No

If City permits, licenses, or services are required for event, who will pay for them?

Name: Pinellas County Urban League Phone: 7273272081

Address (including zip): 333 31st Street North, St. Petersburg FL 33713

Type of music, # of stages, and # of bands.

Various Genre's (R&B, Gospel, etc.) Approximately 8 groups

List Vending Products. Name & Provider.

N/A

For Use of Beer/Wine - Please provide name, address and phone number of the sponsoring 501(c)3 or catering company.

N/A

Explain subject/purpose of all speeches/demonstrations which will occur.

No speeches only entertainment

Discuss your load in/load out parking needs, include times and dates.

Set up will begin at 7:30am and load out will begin at 2pm

Other Comments: Please describe your fee structure.

None

Other comments:

None

I represent and warrant that the purpose of the proposed activity/event and conduct of the sponsor(s) and the participants shall conform to all requirements of law and all ordinances of the State of Florida, Pinellas County, and the City of St. Petersburg including, but not limited to, City noise ordinances and Parks and Recreation Department Policies and Procedures. I acknowledge that failure to observe such laws, ordinances, or policies and procedures will result in an immediate cancellation of the event and all permits.

WITHOUT LIMITING THE GENERALITY OF THE FOREGOING, I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE PARKS AND RECREATION DEPARTMENT POLICIES AND PROCEDURES PERTAINING TO THE USE OF PARKS AND THE PARK RULES SET FORTH IN ARTICLE II, CHAPTER 21, OF THE ST. PETERSBURG CITY CODE, INCLUDING BUT NOT LIMITED TO THE INDEMNIFICATION AND INSPECTION OBLIGATIONS ASSUMED BY ME AND THE PERSON OR ENTITY ON WHOSE BEHALF THIS APPLICATION IS BEING MADE.

I certify that the facts contained in this application are accurate.

Name: Michael J. Boykins, Sr. Title: Director Date: 11/6/18

Appendix A

Co-Sponsored Event Park Fee Structure

* Events in Vinoy Park will be assessed $300.00 per event day (e.g.,1 day event = $300.00, 2 days = $600.00, 3 days or more = $900.00.) This includes the $30.00 park permit fee.

* Events in any other park will be assessed $200.00 per event day (e.g., 1 day event = $200.00, 2 days = $400.00, 3 or more days = $600.00). This includes the $30.00 park permit fee.

* The above fees will be due at the time you submit your application plus the $30.00 co-sponsored application fee.

* All co-sponsored event applications must be submitted at least 6 month prior to the event.

* Any application for a co-sponsored event submitted inside the six (6) month time frame will be assessed a non refundable $1,200.00 late fee.

* **The City requires payment in advance for all City services estimated and/or provided for first time events and one of a kind nonrecurring events.**

* **Payment will be required at least ten (10) business days prior to the start of the event and shall be in the form of cash, certified check, or an irrevocable bank letter of credit.**

* **All first time entities requesting events will be required to complete a credit application.**

Appendix B
President or CEO
Responsible Party Information

Please complete the information below for each responsible party.

Name of the **Nonprofit** Corporation: Pinellas County Urban League

Name of Responsible Party (President or CEO ONLY): Re. Watson L. Haynes, II

Title of Responsible Party: President & CEO

Physical Address of Responsible Party: 333 31st Street North

Phone Number of Responsible Party: 727.327.2081 x101

Email Address of Responsible Party: whaynes@pcul.org

Nonprofit (Employee Identification Number):

Name of the **For-profit** Corporation:

Name of Responsible Party (President or CEO ONLY):

Title of Responsible Party:

Physical Address of Responsible Party:

Phone Number of Responsible Party:

Email Address of Responsible Party:

For-profit (Employee Identification Number)

Please include a copy of the the current IRS Nonprofit Affidavit / For Profit

What method of invoicing would your organization prefer?

☒ BY Mail

Contact Name: Michael J. Boykins, Sr.

Address: 333 31st Street North

City, State, Zip: St. Petersburg, FL 33712

☐ BY EMAIL

Email Address:

APPENDIX C
STATEMENT OF REVENUE AND EXPENSES FORM
PRIOR YEAR'S EVENT
(Must be completed)

Name of Event: Community Festival

Date(s) of Event: Apr 13, 2019 - Apr 13, 2019

I. REVENUE SOURCES (attach sheet if more space is needed)

		Amount
1.	Healthy Start	$5,000.00
2.		
3.		
4		
5.		
6.		
7.		
8.		
	TOTAL GROSS REVENUE	$5,000.00

II. EXPENSES (attach sheet if more space is needed)

1.	Staging, Chairs, Tables (Rent-all City)	$2,000.00
2.	Portoilets (3)	$800.00
3.	DJ	$300.00
4	Bounce Houses	$500.00
5.	Food	$550.00
6.	T-Shirts	$860.00
7.		
8.		
9.		
10.		
11.		
12.		
	TOTAL OPERATING EXPENSES	$5,010.00
	TOTAL NET INCOME	($10.00)

III. ALLOCATION OF NET INCOME (attach sheet if more space is needed)

1.		
2.		
3.		
4.		
5.		
6.		
	TOTAL ALLOCATION OF NET INCOME	

Prepared by: Michael J. Boykins, Sr. Date: Nov 6, 2018

Print Application

Submit Application by Email

Florida Department of State

DIVISION OF CORPORATIONS

Department of State / Division of Corporations / Search Records / Detail By Document Number /

Detail by Entity Name

Florida Not For Profit Corporation
PINELLAS COUNTY URBAN LEAGUE, INC.

Filing Information

Document Number	735730
FEI/EIN Number	59-1665523
Date Filed	05/04/1976
State	FL
Status	ACTIVE
Last Event	NAME CHANGE AMENDMENT
Event Date Filed	03/05/1980
Event Effective Date	NONE

Principal Address

333 31ST STREET NORTH
ST. PETERSBURG, FL 33713

Changed: 02/18/1992

Mailing Address

333 31ST STREET NORTH
ST. PETERSBURG, FL 33713

Changed: 02/18/1992

Registered Agent Name & Address

Haynes, Watson L, II
333 31ST STREET NORTH
ST. PETERSBURG, FL 33713

Name Changed: 02/12/2013

Address Changed: 04/11/2007

Officer/Director Detail

Name & Address

Title Treasurer

Biafora, Frank, Dr.
725 16th Avenue NE
SAINT PETERSBURG, FL 33704

Title Chairman

Smith, Erik C
7310 Dartmouth Avenue North
Saint Petersburg, FL 33701

Title President

Haynes, Watson L, II
333 31ST ST N
SAINT PETERSBURG, FL 33713

Title Asst. Secretary

Brown, Leah
5413 State Road 64E
Bradenton, FL 34208

Title Second Vice Chairperson

McMillon, Grant
3201 34th Street South
Building A, 4th Floor
St. Petersburg, FL 33711

Title First Vice Chairperson

Marcelli, Linda
5220 31st Avenue South
Gulfport, FL 33707

Title Secretary

Clark, Jessica L
4703 Horton Road
Plant City, FL 33567

Title Asst. Treasurer

Nesmith, Alvin C.
1301 34th Street North
St. Petersburg, FL 33713

Annual Reports

Report Year	Filed Date
2016	02/16/2016
2017	02/14/2017
2018	02/20/2018

Document Images

02/20/2018 -- ANNUAL REPORT View image in PDF format

02/14/2017 -- ANNUAL REPORT	View image in PDF format
02/16/2016 -- ANNUAL REPORT	View image in PDF format
02/27/2015 -- ANNUAL REPORT	View image in PDF format
02/05/2014 -- ANNUAL REPORT	View image in PDF format
02/12/2013 -- ANNUAL REPORT	View image in PDF format
03/16/2012 -- ANNUAL REPORT	View image in PDF format
01/25/2011 -- ANNUAL REPORT	View image in PDF format
03/12/2010 -- ANNUAL REPORT	View image in PDF format
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04/11/2007 -- ANNUAL REPORT	View image in PDF format
04/10/2006 -- ANNUAL REPORT	View image in PDF format
05/06/2005 -- ANNUAL REPORT	View image in PDF format
03/31/2004 -- ANNUAL REPORT	View image in PDF format
02/13/2003 -- ANNUAL REPORT	View image in PDF format
04/08/2002 -- ANNUAL REPORT	View image in PDF format
03/29/2001 -- ANNUAL REPORT	View image in PDF format
03/29/2000 -- ANNUAL REPORT	View image in PDF format
05/06/1999 -- ANNUAL REPORT	View image in PDF format
04/29/1998 -- ANNUAL REPORT	View image in PDF format
04/03/1997 -- ANNUAL REPORT	View image in PDF format
02/08/1996 -- ANNUAL REPORT	View image in PDF format
02/15/1995 -- ANNUAL REPORT	View image in PDF format

st.petersburg

Contract/Permit

Contract #: 25407
Date: 06 Nov 2018

User: JSBENNIN
Status: Firm

PINELLAS COUNTY URBAN LEAGUE
MICHAEL BOYKINS
333 31ST ST N
ST PETERSBURG FL 33713 USA

Primary #: (727) 327-2081
Secondary #: ()
Other #: ()

Purpose of Use: COMMUNITY FESTIVAL **Expected: 500** **Co-Sponsored Event**

Contract Balance $60.00

Conditions of Use: Insurance Required

Other Information:

Use of beer and wine	No
Use of fencing	No
Use of liquor	No

Date(s) and Time(s) of Use: **Starting: Sat 13 Apr 19 06:00 am** **Ending: Sat 13 Apr 19 09:00 pm**

Facility/Equipment	Day	Date	Time	Fee	Extra Fee	Tax	Total
Campbell Park	Sat	13 Apr 2019	06:00 AM	$0.00	$0.00	$0.00	$0.00
Park			09:00 PM				

Additional Fees:

Extra Fee	Quantity	Charge	Tax	Total
Application Processing Fee - Parks	1	$30.00	$0.00	$30.00
Co-Sponsored Application Fee	1	$30.00	$0.00	$30.00
				$60.00

Charges:

Fees	Extra Fees	Tax	Total	Deposit	Total Applied	Contract Balance	Account Balance
$ 0.00	$60.00	$0.00	$60.00	$0.00	$0.00	$60.00	$1,670.00

Balance of rental due and payable immediately.

Payments:

Additional Notes:

I have read this Agreement and agree to comply with the terms and conditions set forth in this Agreement. I also understand this Agreement is not final until approved and executed by the Parks and Recreation Superintendent or designee.

By:(Sign Name) _____

(Print Name) **MICHAEL BOYKINS**

PINELLAS COUNTY URBAN LEAGUE
Name of User Organization, If Applicable

CITY OF ST. PETERSBURG, FLORIDA

By:(Sign Name): _____
Parks and Recreation Superintendent

(Print Name) _____
Parks and Recreation Department

_____
Supervisor II / Foreman

☐ Approved or ☐ Rejected Date: _____

_____
Manager

☐ Approved or ☐ Rejected Date: _____

st.petersburg

Contract/Permit

Contract #: 25407
Date: 06 Nov 2018

User: JSBENNIN
Status: Firm

_____ ☐ Approved or ☐ Rejected Date: _____
Manager

The Americans with Disabilities Act (A.D.A.) guarantees equal opportunity for people with disabilities. Special accommodation requests such as sign language interpreters, taped or Braille materials, assistive listening devices, etc., should be made at least one week prior to the activity or program. Individuals using TTD devices, please contact us using the Florida Relay Service at 800-955-8771.

CITY OF ST. PETERSBURG
PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENT APPLICATION

st.petersburg
www.stpete.org

st. petersburg parks & recreation

Date Received: 11-6-18
Check or Cash:
Application #: 86
Packet: C
Permit #: 25418

Event Title: The Downtown 20K Relay Race Phone No.: 7274591302 Fax No.:

Entity Name: Kappa Alpha Psi Guide Right Foundation Federal I.D. Number: 56-2473863

Event Date(s): ~~April or May 2019~~ June 1, 2019 Location: Open

Day 1 of Event: Saturday Time Gates Open: 6am Ending Time: 12pm

Day 2 of Event: Time Gates Open: Ending Time:

Day 3 of Event: Time Gates Open: Ending Time:

Application Prepared by: LaShanta Keys Phone: 7274591302

Title: Board Member Cell Phone: Same as above

Address: 15826 Hampton Village Drive City: Tampa State: FL Zip: 33618

Email Address: MrLKeys75@gmail.com

Additional Contact Person: Samuel Pina Day Phone: 8134841329

What month/year were you incorporated as nonprofit? December 2016

List all 501(c)3 entities that will benefit from this event. Community EFX Scholarship Fund and Dr. Carter G. Woodson Museum

Name of the for-profit entity?

Describe your event with details.

We want the City of St. Petersburg residents to grab a group of friends and race in The Downton 20K Relay Race in the Spring of 2019. Conceived as a relay for teams, each member takes a loop on the 5K course before handing the race off to a teammate. For runners looking forward to an individual challenge, the 20K and 10K can be run without any teammates. This will be a fun event for all ages and athletic types.

Describe what economic benefit and impact this event will bring to St. Petersburg.

The event will bring in residents along with other runners from around the country. The event will bring people to the waterfront as well as shopping at eateries in Downtown St. Petersburg. In addition, this event will also allow vendors who focus on a healthy St. Petersburg to provide and/or sell products to the runners.

Each co-sponsored entity must possess liability insurance naming the City of St. Petersburg as an additional insured and secure said insurance in the amount determined by the City.

Does your group presently have liability insurance? ☐ YES ☒ NO How much?

Are there plans to sell or distribute beer/wine at your event? ☐ YES ☒ NO

Will there be an admission / registration fee? ☒ YES ☐ NO Advanced Fee: $25-$45 Day of: N/A

Please provide the website address for your event. www.DowntownRelayRace.com

Please provide a phone number that can be advertised to the public.

What is the estimated attendance for this event? Spectators 200 Participants 500 Last Year's Total Attendance N/A

Please check the equipment and/or facilities you are requesting.

Recreation Equipment

Showmobile (Yes/No) NO

Bleacher(s) needed. Each bleacher approx. 180 people)

Tables (6 ft) # needed 10 Chairs # needed 20

Public Address System Yes

# of portable risers needed (4 in. x 8 in. x 16 in. sections)

Special Events Facilities

- ☐ Mahaffey Theater
- ☐ Coliseum
- ☐ Sunken Gardens
- ☐ Boyd Hill

☐ Non-City Locations

Which Location?

The following departments may provide and charge for additional services. You will be provided cost estimates in your Co-sponsored Agreement.

POLICE:	Public Safety Personnel, Marine Services
TRAFFIC:	Personnel, Equipment (cones, barricades, no parking signs)
FIRE:	Paramedics, Inspectors
PARKS SERVICES:	Cleanup Personnel, Dumpster(s), Trash Receptacles, Event Site Preparation and Restoration
RECREATION SERVICES:	On-site Presence, Logistics Help, Liaison with Other Ddepartments

Note: The City does not provide tents, Port-O-Lets, or large quantities of tables and chairs.

I certify that the event will be open to all citizens and that individuals will not be barred from participation due to race, creed, color, national origin, sex, age, or physical impairment. I understand that a financial report of the event is due in the Parks and Recreation office within 30 days of the completion of the event. I also understand that the City is to be shown as a co-sponsor on any promotional materials produced for the event. I agree to obtain the required liability insurance and to secure all necessary city/county/state permits/licenses. I further certify that the facts contained in this application are accurate.

Name:	LaShante Keys	Title:	Board Member	Date:	11/1/2018
Co-Sign:	Samuel Pina	Title:	Fiscal Agent	Date:	11/5/2018

NOTE:

a. **If person/entity preparing this application is not representing a nonprofit entity, the application must be co-signed by someone from a sponsoring nonprofit entity. A copy of the sponsoring entity's 501(c)3 designation must accompany this application.**

b. **If your entity has outstanding financial obligations with any department within the City of St. Petersburg, your application will not be processed until debt if paid.**

c. **Applications lacking information or the required completed appendixes listed below will not be processed.**

PLEASE ATTACH THE FOLLOWING

1. Route map for parade, run, walk, and/or bike event.
2. Site map of event and detail schedule of each day's events including open and close times.
3. Complete Appendix B and Appendix C.
4. Check for $30.00 for co-sponsored application processing (non-refundable).
5. Check for park permit fee. See Appendix A for fee structure.
6. A copy of 501(c)3 designation (if applicable)

FOR FURTHER INFORMATION, PLEASE CALL LYNN GORDON, PARKS & RECREATION MANAGER,
727-893-7766 or EMAIL: StPeteEvents@stpete.org

st.petersburg
www.stpete.org

PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENTS
SUMMARY SHEET

st. petersburg parks & recreation

Review and check all conditions which apply to this event: Note the corresponding obligation for each condition.

Condition		Obligation
☐ Public Invited		General Liability Insurance
☒ Located in Park		Park Permit
☒ Vending Product / Merchandise Sales		Occupational License
☐ Vending Food / Beverage		Health Inspection
☒ Vendors / Exhibitors	How many?	
☐ Vending Beer / Wine		Alcohol Permit Additional insurance Required
☐ Erecting Tents - Larger than 10ft x 12ft	How many?	Temporary Structure Permit
☐ Fence Installation	What type?	Temporary Structure Permit
☐ Other Structures	What structure?	Temporary Structure Permit
☐ Open Flame Food Preparation		Fire Inspection Permit
☐ Pyrotechnics		Fireworks Permit
☐ Require Street Closure		Parade or Street Closure Permit(s)
☐ VIP Area		
☒ Staging	☐ Professional ☐ Showmobile ☐ Other	
☒ Amplified Sound	☐ Performers ☐ Announcement Only	
☐ Security	☐ Daytime - Private ☐ Overnight - Private ☐ Event Time Frame - SPPD	
☐ Sanitary Facilities - Port-O-Lets	Regular Units ____ Disabled Units ____ Hand Washing ____	
☐ Off-site Parking / Shuttle		
☐ Semitruck / Tractor Trailer		

Marketing: Please check all that apply.

☐ Invitations	☐ Radio
☐ Posters / Flyers	☐ Television
☐ Newspaper / Internet	☐ Remote Broadcast

City logo should be used in any promotional materials, posters, flyers, ads, website, public service announcements, and press releases.

Electrical Requirements:

Does your event require any power needs using more than the standard 110/20amp located in the parks? ☒ YES ☐ NO

If YES, check all that apply. ☐ RV'S ☐ Coffee Vendors ☐ Ice Bins ☐ Freezers ☐ Ice Cream Vendors ☐ Catering Trucks

☐ Other:

Please explain the details of the above items checked. Tell us how much and what type of power they would require.

We would like to have a DJ in the area to entertain the spectators and play music.

Will you supply your own generators? ☐ YES ☒ NO

Will your event have a licensed electrician on-site during the event? ☐ YES ☒ NO If YES, who?

Will your event be requesting any variances from City policies or procedures? If YES, please explain.

N/A

If City permits, licenses, or services are required for event, who will pay for them?

Name: Community EFX, INC. Phone: 7274591302

Address (including zip): 15826 Hampton Village Drive; Tampa, Fl 33618

Type of music, # of stages, and # of bands.

A variety of family friendly music

List Vending Products. Name & Provider.

We are working with individuals that focus on running which will include but not limited to Running shoe stores, protein shakes and health food options.

For Use of Beer/Wine - Please provide name, address and phone number of the sponsoring 501(c)3 or catering company.

N/A

Explain subject/purpose of all speeches/demonstrations which will occur.

The event will focus on announcing the winners of the events within the categories as well as giving our thanks for those who have made this such a great event

Discuss your load in/load out parking needs, include times and dates.

Other Comments: Please describe your fee structure.

The Downtown 20K Relay Race will have an early bird special for runners starting at $25 per runner. The regular registration will be $35 per runner. The late registration will be $45 per runner. Due to the nature of the this event and the time it will take to coordinate the teams there will not be an on-site registration.

Other comments:

I represent and warrant that the purpose of the proposed activity/event and conduct of the sponsor(s) and the participants shall conform to all requirements of law and all ordinances of the State of Florida, Pinellas County, and the City of St. Petersburg including, but not limited to, City noise ordinances and Parks and Recreation Department Policies and Procedures. I acknowledge that failure to observe such laws, ordinances, or policies and procedures will result in an immediate cancellation of the event and all permits.

WITHOUT LIMITING THE GENERALITY OF THE FOREGOING, I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE PARKS AND RECREATION DEPARTMENT POLICIES AND PROCEDURES PERTAINING TO THE USE OF PARKS AND THE PARK RULES SET FORTH IN ARTICLE II, CHAPTER 21, OF THE ST. PETERSBURG CITY CODE, INCLUDING BUT NOT LIMITED TO THE INDEMNIFICATION AND INSPECTION OBLIGATIONS ASSUMED BY ME AND THE PERSON OR ENTITY ON WHOSE BEHALF THIS APPLICATION IS BEING MADE.

I certify that the facts contained in this application are accurate.

Name: LaShante Keys Title: Board Member Date: 11/6/2018

Appendix A

Co-Sponsored Event Park Fee Structure

* Events in Vinoy Park will be assessed $300.00 per event day (e.g.,1 day event = $300.00, 2 days = $600.00, 3 days or more = $900.00.) This includes the $30.00 park permit fee.

* Events in any other park will be assessed $200.00 per event day (e.g., 1 day event = $200.00, 2 days = $400.00, 3 or more days = $600.00). This includes the $30.00 park permit fee.

* The above fees will be due at the time you submit your application plus the $30.00 co-sponsored application fee.

* All co-sponsored event applications must be submitted at least 6 month prior to the event.

* Any application for a co-sponsored event submitted inside the six (6) month time frame will be assessed a non refundable $1,200.00 late fee.

* **The City requires payment in advance for all City services estimated and/or provided for first time events and one of a kind nonrecurring events.**

* **Payment will be required at least ten (10) business days prior to the start of the event and shall be in the form of cash, certified check, or an irrevocable bank letter of credit.**

* **All first time entities requesting events will be required to complete a credit application.**

Appendix B
President or CEO
Responsible Party Information

Please complete the information below for each responsible party.

Name of the **Nonprofit** Corporation: Kappa Alpha Psi Guide Right Foundation

Name of Responsible Party (President or CEO ONLY): LaShante Keys

Title of Responsible Party: Board Member

Physical Address of Responsible Party: 15826 Hampton Village Drive; Tampa, Fl 33618

Phone Number of Responsible Party: 7274591302

Email Address of Responsible Party: MrLKeys75@Gmail.com

Nonprofit (Employee Identification Number): 56-2473863

Name of the **For-profit** Corporation:

Name of Responsible Party (President or CEO ONLY):

Title of Responsible Party:

Physical Address of Responsible Party:

Phone Number of Responsible Party:

Email Address of Responsible Party:

For-profit (Employee Identification Number)

Please include a copy of the the current IRS Nonprofit Affidavit / For Profit

What method of invoicing would your organization prefer?

☐ BY Mail

Contact Name

Address

City, State, Zip

☒ BY EMAIL

Email Address: MrLKeys75@Gmail.com

APPENDIX C
STATEMENT OF REVENUE AND EXPENSES FORM
PRIOR YEAR'S EVENT
(Must be completed)

Name of Event:

Date(s) of Event:

I. REVENUE SOURCES (attach sheet if more space is needed)

		Amount
1.		
2.		
3.		
4		
5.		
6.		
7.		
8.		
	TOTAL GROSS REVENUE	

II. EXPENSES (attach sheet if more space is needed)

1.		
2.		
3.		
4		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
	TOTAL OPERATING EXPENSES	
	TOTAL NET INCOME	

III. ALLOCATION OF NET INCOME (attach sheet if more space is needed)

1.		
2.		
3.		
4.		
5.		
6.		
	TOTAL ALLOCATION OF NET INCOME	

Prepared by:

Date:

Print Application

Submit Application by Email

Florida Department of State DIVISION OF CORPORATIONS

Department of State / Division of Corporations / Search Records / Detail By Document Number /

Detail by Entity Name

Florida Not For Profit Corporation
KAPPA ALPHA PSI GUIDE RIGHT FOUNDATION OF ST. PETERSBURG, INC

Filing Information

Document Number	N04000005450
FEI/EIN Number	56-2473863
Date Filed	06/01/2004
State	FL
Status	ACTIVE
Last Event	REINSTATEMENT
Event Date Filed	04/27/2011

Principal Address

930 59TH AVENUE SOUTH
ST PETERSBURG, FL 33705 UN

Changed: 08/29/2012

Mailing Address

P.O. BOX 12066
ST PETERSBURG, FL 33733-2066

Changed: 04/27/2011

Registered Agent Name & Address

Nicholas, Andrew G
9520 Charlesberg Dr
Tampa, FL 33635

Name Changed: 02/09/2017

Address Changed: 02/09/2017

Officer/Director Detail

Name & Address

Title President

Laury, Tyrone J
1087 Demetree Lane
Lakeland, FL 33811

Title Director

KEYS, LASHANTE
15826 HAMPTON VILLAGE DRIVE
TAMPA, FL 33618

Title Treasurer

Nicholas, Andrew
9520 Charlesberg Dr.
Tampa, FL 33635

Title VP

George, Kelvin
2519 26th St South
ST PETERSBURG, FL 33712

Title Secretary

Montana, Charles
1576 NURSERY ROAD
St. Petersburg, FL 33756

Annual Reports

Report Year	Filed Date
2016	05/18/2016
2017	02/09/2017
2018	03/08/2018

Document Images

03/08/2018 -- ANNUAL REPORT	View image in PDF format
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05/18/2016 -- ANNUAL REPORT	View image in PDF format
04/20/2015 -- ANNUAL REPORT	View image in PDF format
04/10/2014 -- ANNUAL REPORT	View image in PDF format
04/23/2013 -- ANNUAL REPORT	View image in PDF format
08/29/2012 -- ANNUAL REPORT	View image in PDF format
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10/10/2007 -- REINSTATEMENT	View image in PDF format
04/12/2006 -- ANNUAL REPORT	View image in PDF format
06/02/2005 -- ANNUAL REPORT	View image in PDF format
07/14/2004 -- Name Change	View image in PDF format
06/01/2004 -- Domestic Non-Profit	View image in PDF format

st.petersburg

Contract/Permit

Contract #: 25418
Date: 07 Nov 2018

User: JSBENNIN
Status: Firm

KAPPA ALPHA PSI GUIDE RIGHT FOUNDATION O
LASHANTE KEYS
15826 HAMPTON VILLAGE DR.
TAMPA FL 33618 USA

Primary #: (727) 459-1302
Secondary #: ()
Other #: ()

Purpose of Use: THE DOWNTOWN 20K RELAY RACE **Expected:** 500 **Co-Sponsored Event**

Contract Balance $200.00

Conditions of Use: Insurance Required

Other Information:

Use of beer and wine	No
Use of fencing	No
Use of liquor	No

Date(s) and Time(s) of Use: **Starting:** Thu 30 May 19 06:00 am **Ending:** Sun 02 Jun 19 09:00 pm

Facility/Equipment	Day	Date	Time	Fee	Extra Fee	Tax	Total
Albert Whitted Park	Thu	30 May 2019	06:00 AM	$0.00	$200.00	$0.00	$200.00
Park		02 Jun 2019	09:00 PM				

Additional Fees:

Extra Fee	Quantity	Charge	Tax	Total
Co-Sponsored Application Fee	1	$30.00	$0.00	$30.00
				$30.00

Extra Fee - Bookings	Hours	Quantity	Charge	Tax	Total
Co-Sponsored Permit Fee	87:00	1	$200.00	$0.00	$200.00
		1	$200.00	$0.00	$200.00

Charges:

Fees	Extra Fees	Tax	Total	Deposit	Total Applied	Contract Balance	Account Balance
$ 0.00	$230.00	$0.00	$230.00	$0.00	$30.00	$200.00	$200.00

Balance of rental due and payable immediately.

Payments:

Date	Amount	Payment Type	Reference	Receipt Number
07 Nov 2018	$30.00	Money Order	Rental	3189271

Additional Notes:

I have read this Agreement and agree to comply with the terms and conditions set forth in this Agreement. I also understand this Agreement is not final until approved and executed by the Parks and Recreation Superintendent or designee.

By: (Sign Name) _____

(Print Name) LASHANTE KEYS

KAPPA ALPHA PSI GUIDE RIGHT FOUNDATION O
Name of User Organization, If Applicable

CITY OF ST. PETERSBURG, FLORIDA

By: (Sign Name): _____
Parks and Recreation Superintendent

(Print Name) _____
Parks and Recreation Department

Supervisor II / Foreman	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:

The Americans with Disabilities Act (A.D.A.) guarantees equal opportunity for people with disabilities. Special accommodation requests such as sign language interpreters, taped or Braille materials, assistive listening devices, etc., should be made at least one week prior to the activity or program. Individuals using TTD devices, please contact us using the Florida Relay Service at 800-955-8771.

CITY OF ST. PETERSBURG
PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENT APPLICATION

st.petersburg
www.stpete.org

st. petersburg parks & recreation

Date Received: 11-6-18
Check or Cash:
Application #: 87
Packet: C
Permit #: 25419

Event Title: Painting in the Park 2019 Phone No.: 7278962667 Fax No.: 7278944638

Entity Name: Museum of Fine Arts of St Petersburg Florida, Inc. Federal I.D. Number: 590949278

Event Date(s): Saturday, April 27, 2019 Location: North Straub Park/Museum Grounds

Day 1 of Event: April 27 Time Gates Open: 11am Ending Time: 3pm

Day 2 of Event: Time Gates Open: Ending Time:

Day 3 of Event: Time Gates Open: Ending Time:

Application Prepared by: JP Fatseas Phone: 727-896-2667

Title: Director of Operations Cell Phone: 727-667-3830

Address: 255 Beach Drive NE City: St. Petersburg State: FL Zip: 33701

Email Address: jpfatseas@mfastpete.org

Additional Contact Person: Margaret Murray Day Phone: 727-896-2667

What month/year were you incorporated as nonprofit? 02/20/1961

List all 501(c)3 entities that will benefit from this event. N/A

Name of the for-profit entity? N/A

Describe how this event will contribute to the quality of life in and enhance the image of St. Petersburg.

This is a free outdoor activity that celebrates the creativity within us all. Art activities are designed for all ages and abilities with an emphasis on painting. Last year we brought together over 2,000 people that participated in community built murals, hands-on activities, and experimenting with different modalities of painting. Through this process we raised awareness of local cottage industries and independent businesses.
The event is a metaphor for the city of St. Petersburg arts, ingenuity, collaboration, philanthropy, and business.

Describe what economic benefit and impact this event will bring to St. Petersburg.

The increase in pedestrian traffic to the event overflows into local businesses along Beach Drive. By collaborating with local enterprises we raise awareness of the resources in this community. Having a free arts event during the St. Anthony's Triathlon weekend underscores the city's image as a vibrant arts destination.

Each co-sponsored entity must possess liability insurance naming the City of St. Petersburg as an additional insured and secure said insurance in the amount determined by the City.

Does your group presently have liability insurance? ☒ YES ☐ NO How much? 1,000,000.00

Are there plans to sell or distribute beer/wine at your event? ☒ YES ☐ NO

Will there be an admission / registration fee? ☐ YES ☒ NO Advanced Fee: Day of:

Please provide the website address for your event. www.mfastpete.org

Please provide a phone number that can be advertised to the public. 727-896-2667

What is the estimated attendance for this event? Spectators Participants 4,000 Last Year's Total Attendance 2,000

Please check the equipment and/or facilities you are requesting.

Recreation Equipment

Showmobile (Yes/No) No

Bleacher(s) needed. Each bleacher approx. 180 people) 0

Tables (6 ft) # needed 0 Chairs # needed 0

Public Address System No

# of portable risers needed (4 in. x 8 in. x 16 in. sections) 0

Special Events Facilities

- ☐ Mahaffey Theater
- ☐ Coliseum
- ☐ Sunken Gardens
- ☐ Boyd Hill

☐ Non-City Locations

Which Location?

North Straub Park/MFA Grounds

The following departments may provide and charge for additional services. You will be provided cost estimates in your Co-sponsored Agreement.

POLICE:	Public Safety Personnel, Marine Services
TRAFFIC:	Personnel, Equipment (cones, barricades, no parking signs)
FIRE:	Paramedics, Inspectors
PARKS SERVICES:	Cleanup Personnel, Dumpster(s), Trash Receptacles, Event Site Preparation and Restoration
RECREATION SERVICES:	On-site Presence, Logistics Help, Liaison with Other Ddepartments

Note: The City does not provide tents, Port-O-Lets, or large quantities of tables and chairs.

I certify that the event will be open to all citizens and that individuals will not be barred from participation due to race, creed, color, national origin, sex, age, or physical impairment. I understand that a financial report of the event is due in the Parks and Recreation office within 30 days of the completion of the event. I also understand that the City is to be shown as a co-sponsor on any promotional materials produced for the event. I agree to obtain the required liability insurance and to secure all necessary city/county/state permits/licenses. I further certify that the facts contained in this application are accurate.

Name: KA Shepherd Title: Exec Dir Date: 11/6/18

Co-Sign: Title: Date:

NOTE:

a. **If person/entity preparing this application is not representing a nonprofit entity, the application must be co-signed by someone from a sponsoring nonprofit entity. A copy of the sponsoring entity's 501(c)3 designation must accompany this application.**

b. **If your entity has outstanding financial obligations with any department within the City of St. Petersburg, your application will not be processed until debt if paid.**

c. **Applications lacking information or the required completed appendixes listed below will not be processed.**

PLEASE ATTACH THE FOLLOWING

1. Route map for parade, run, walk, and/or bike event.
2. Site map of event and detail schedule of each day's events including open and close times.
3. Complete Appendix B and Appendix C.
4. Check for $30.00 for co-sponsored application processing (non-refundable).
5. Check for park permit fee. See Appendix A for fee structure.
6. A copy of 501(c)3 designation (if applicable)

FOR FURTHER INFORMATION, PLEASE CALL LYNN GORDON, PARKS & RECREATION MANAGER, 727-893-7766 or EMAIL: StPeteEvents@stpete.org

st.petersburg
www.stpete.org

PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENTS
SUMMARY SHEET

st. petersburg parks & recreation

Review and check all conditions which apply to this event: Note the corresponding obligation for each condition.

Condition		Obligation
☒ Public Invited		General Liability Insurance
☒ Located in Park		Park Permit
☒ Vending Product / Merchandise Sales		Occupational License
☒ Vending Food / Beverage		Health Inspection
☐ Vendors / Exhibitors	How many?	
☒ Vending Beer / Wine		Alcohol Permit Additional insurance Required
☐ Erecting Tents - Larger than 10ft x 12ft	How many?	Temporary Structure Permit
☐ Fence Installation	What type?	Temporary Structure Permit
☐ Other Structures	What structure?	Temporary Structure Permit
☒ Open Flame Food Preparation		Fire Inspection Permit
☐ Pyrotechnics		Fireworks Permit
☐ Require Street Closure		Parade or Street Closure Permit(s)
☐ VIP Area		
☐ Staging	☐ Professional ☐ Showmobile ☐ Other	
☒ Amplified Sound	☒ Performers ☐ Announcement Only	
☐ Security	☐ Daytime - Private ☐ Overnight - Private ☐ Event Time Frame - SPPD	
☐ Sanitary Facilities - Port-O-Lets	Regular Units ☐ Disabled Units ☐ Hand Washing ☐	
☐ Off-site Parking / Shuttle		
☐ Semitruck / Tractor Trailer		

Marketing: Please check all that apply.

☐ Invitations	☒ Radio
☒ Posters / Flyers	☐ Television
☒ Newspaper / Internet	☐ Remote Broadcast

City logo should be used in any promotional materials, posters, flyers, ads, website, public service announcements, and press releases.

Electrical Requirements:

Does your event require any power needs using more than the standard 110/20amp located in the parks? ☒ YES ☐ NO

If YES, check all that apply. ☐ RV'S ☒ Coffee Vendors ☒ Ice Bins ☐ Freezers ☒ Ice Cream Vendors ☒ Catering Trucks

☐ Other:

Please explain the details of the above items checked. Tell us how much and what type of power they would require.

We are still finalizing our vendors for next year. When we do, we will notify the city.

Will you supply your own generators? ☐ YES ☒ NO

Will your event have a licensed electrician on-site during the event? ☐ YES ☒ NO If YES, who?

Will your event be requesting any variances from City policies or procedures? If YES, please explain.

If City permits, licenses, or services are required for event, who will pay for them?

Name: Museum of Fine Arts Phone: 727-896-2667

Address (including zip): 255 Beach Drive NE; 33701

Type of music, # of stages, and # of bands.

Kid and family friendly pop music played by DJ

List Vending Products. Name & Provider.

We are still finalizing our vendors for next year. When we do, we will notify the city.

For Use of Beer/Wine - Please provide name, address and phone number of the sponsoring 501(c)3 or catering company.

Museum of Fine Arts, 255 Beach Drive NE, St. Petersburg, FL 33701

Explain subject/purpose of all speeches/demonstrations which will occur.

Discuss your load in/load out parking needs, include times and dates.

Load in: Using the Northern most Museum ramp off of Bayshore Drive onto the northern grounds of the Museum from 10am - 12:00pm.

Other Comments: Please describe your fee structure.

Art activities are free for everyone. Vendors will have separate fee. They are informed that we advertise this event as free and to price their product accordingly.

Other comments:

I represent and warrant that the purpose of the proposed activity/event and conduct of the sponsor(s) and the participants shall conform to all requirements of law and all ordinances of the State of Florida, Pinellas County, and the City of St. Petersburg including, but not limited to, City noise ordinances and Parks and Recreation Department Policies and Procedures. I acknowledge that failure to observe such laws, ordinances, or policies and procedures will result in an immediate cancellation of the event and all permits.

WITHOUT LIMITING THE GENERALITY OF THE FOREGOING, I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE PARKS AND RECREATION DEPARTMENT POLICIES AND PROCEDURES PERTAINING TO THE USE OF PARKS AND THE PARK RULES SET FORTH IN ARTICLE II, CHAPTER 21, OF THE ST. PETERSBURG CITY CODE, INCLUDING BUT NOT LIMITED TO THE INDEMNIFICATION AND INSPECTION OBLIGATIONS ASSUMED BY ME AND THE PERSON OR ENTITY ON WHOSE BEHALF THIS APPLICATION IS BEING MADE.

I certify that the facts contained in this application are accurate.

Name: RA Shepherd Title: Exec Dir. Date: 11/6/18

Appendix A

Co-Sponsored Event Park Fee Structure

* Events in Vinoy Park will be assessed $300.00 per event day (e.g.,1 day event = $300.00, 2 days = $600.00, 3 days or more = $900.00.) This includes the $30.00 park permit fee.

* Events in any other park will be assessed $200.00 per event day (e.g., 1 day event = $200.00, 2 days = $400.00, 3 or more days = $600.00). This includes the $30.00 park permit fee.

* The above fees will be due at the time you submit your application plus the $30.00 co-sponsored application fee.

* All co-sponsored event applications must be submitted at least 6 month prior to the event.

* Any application for a co-sponsored event submitted inside the six (6) month time frame will be assessed a non refundable $1,200.00 late fee.

* **The City requires payment in advance for all City services estimated and/or provided for first time events and one of a kind nonrecurring events.**

* **Payment will be required at least ten (10) business days prior to the start of the event and shall be in the form of cash, certified check, or an irrevocable bank letter of credit.**

* **All first time entities requesting events will be required to complete a credit application.**

Appendix B
President or CEO
Responsible Party Information

Please complete the information below for each responsible party.

Name of the **Nonprofit** Corporation: Museum of Fine Arts, St. Petersburg, Florida, Inc.

Name of Responsible Party (President or CEO ONLY): Kristen A. Shepherd

Title of Responsible Party: Executive Director

Physical Address of Responsible Party: 255 Beach Drive NE, St. Petersburg, FL 33701

Phone Number of Responsible Party: 727-896-2667

Email Address of Responsible Party: kshepherd@mfastpete.org

Nonprofit (Employee Identification Number): 59-0949278

Name of the **For-profit** Corporation:

Name of Responsible Party (President or CEO ONLY):

Title of Responsible Party:

Physical Address of Responsible Party:

Phone Number of Responsible Party:

Email Address of Responsible Party:

For-profit (Employee Identification Number)

Please include a copy of the the current IRS Nonprofit Affidavit / For Profit

What method of invoicing would your organization prefer?

☒ BY Mail

Contact Name: JP Fatseas

Address: 255 Beach Drive NE

City, State, Zip: St Petersburg, FL 33701

☐ BY EMAIL

Email Address:

APPENDIX C
STATEMENT OF REVENUE AND EXPENSES FORM
PRIOR YEAR'S EVENT
(Must be completed)

Name of Event: Painting in the Park 2018
Date(s) of Event: Apr 28, 2018 -

I. REVENUE SOURCES (attach sheet if more space is needed)

		Amount
1.	Kane's Furniture	$2,500.00
2.	Beer Sales	$1,000.00
3.	Sponsorships	$0.00
4	Beverages	
5.		
6.		
7.		
8.		
	TOTAL GROSS REVENUE	$3,500.00

II. EXPENSES (attach sheet if more space is needed)

1.	City Fees (See Attached Sheet)	
2.	Museum Security	
3.	Performing Vendors	
4	Bartender	
5.	Refreshments for Volunteers	
6.	T-shirts for volunteers	
7.	Printing of postcards	
8.	Paid advertising	
9.	Parking for volunteers and vendors	
10.	Art supplies	
11.	Furniture rental	
12.	Labor	
	TOTAL OPERATING EXPENSES	
	TOTAL NET INCOME	$3,500.00

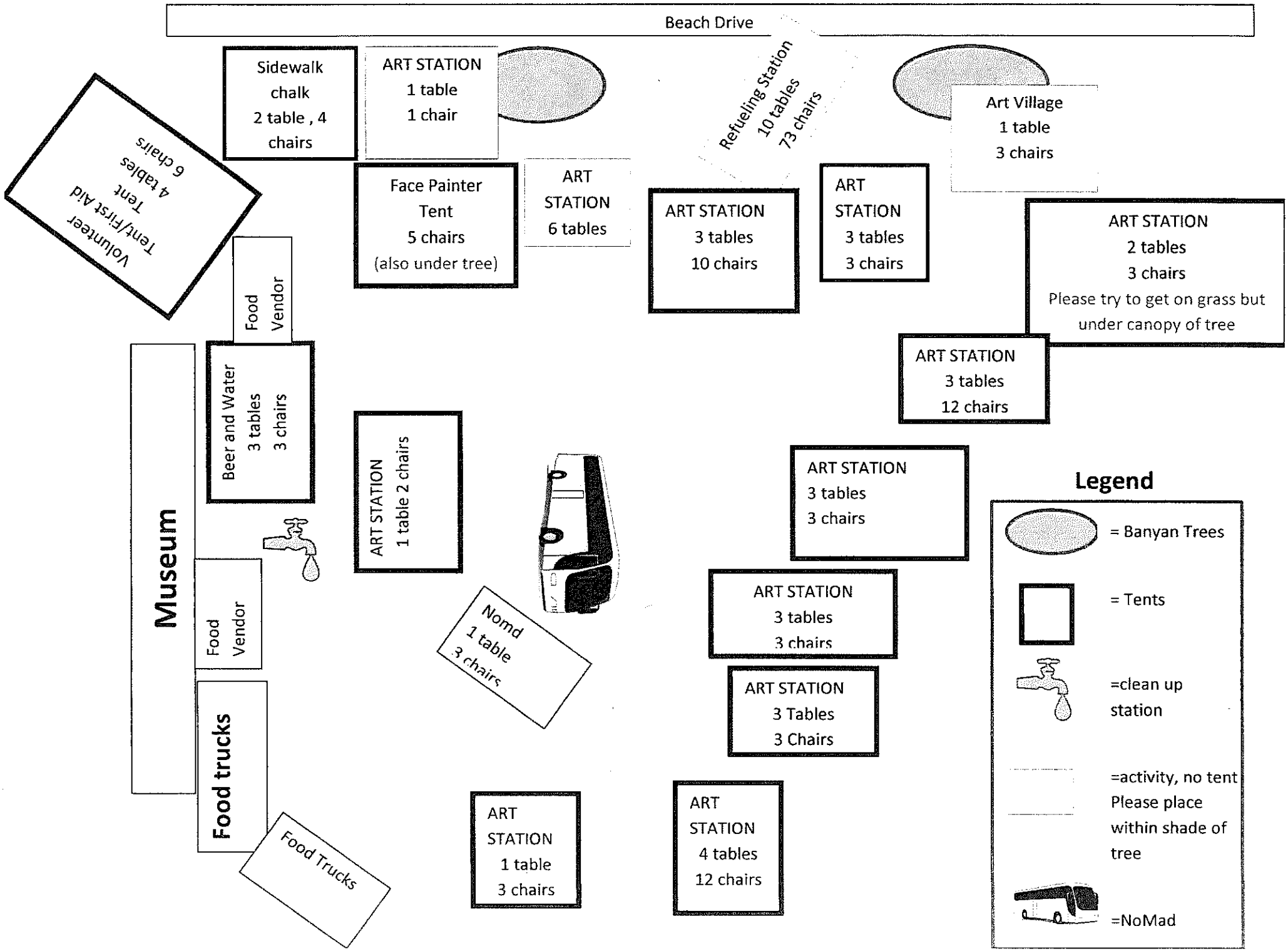
III. ALLOCATION OF NET INCOME (attach sheet if more space is needed)

1.		
2.		
3.		
4.		
5.		
6.		
	TOTAL ALLOCATION OF NET INCOME	

Prepared by: JP Fatseas Date: 10/5/2017

Print Application

Submit Application by Email


Beach Drive
Sidewalk chalk 2 table , 4 chairs
ART STATION 1 table 1 chair
Refueling Station 10 tables 73 chairs
Art Village 1 table 3 chairs
Volunteer Tent/First Aid Tent 4 tables 6 chairs
Face Painter Tent 5 chairs (also under tree)
ART STATION 6 tables
ART STATION 3 tables 10 chairs
ART STATION 3 tables 3 chairs
ART STATION 2 tables 3 chairs Please try to get on grass but under canopy of tree
Food Vendor
ART STATION 3 tables 12 chairs
Beer and Water 3 tables 3 chairs
Museum
ART STATION 1 table 2 chairs
ART STATION 3 tables 3 chairs
Legend
= Banyan Trees
= Tents
=clean up station
=activity, no tent Please place within shade of tree
=NoMad
Food Vendor
Nomd 1 table 3 chairs
ART STATION 3 tables 3 chairs
ART STATION 3 Tables 3 Chairs
Food trucks
Food Trucks
ART STATION 1 table 3 chairs
ART STATION 4 tables 12 chairs

Florida Department of State

DIVISION OF CORPORATIONS

Department of State / Division of Corporations / Search Records / Detail By Document Number /

Detail by Entity Name

Florida Not For Profit Corporation
MUSEUM OF FINE ARTS OF ST PETERSBURG, FLORIDA, INC.

Filing Information

Document Number	702039
FEI/EIN Number	59-0949278
Date Filed	02/20/1961
State	FL
Status	ACTIVE
Last Event	AMENDMENT
Event Date Filed	05/05/2015
Event Effective Date	NONE

Principal Address

255 BEACH DR NE
SAINT PETERSBURG, FL 33701-0498

Changed: 05/23/2000

Mailing Address

255 BEACH DR NE
SAINT PETERSBURG, FL 33701-0498

Changed: 05/23/2000

Registered Agent Name & Address

Shepherd, Kristen A., Ms.
255 BEACH DRIVE N.E.
ST PETERSBURG, FL 33701

Name Changed: 01/06/2017

Address Changed: 06/05/2008

Officer/Director Detail

Name & Address

Title Chairman

Collins, Cathy, Mrs.
255 BEACH DR. NE.
ST. PETERSBURG, FL

Annual Reports

Report Year	Filed Date
2016	03/04/2016
2017	01/06/2017
2018	01/15/2018

Document Images

01/15/2018 -- ANNUAL REPORT	View image in PDF format
01/06/2017 -- ANNUAL REPORT	View image in PDF format
03/04/2016 -- ANNUAL REPORT	View image in PDF format
05/05/2015 -- Amendment	View image in PDF format
04/22/2015 -- ANNUAL REPORT	View image in PDF format
04/30/2014 -- ANNUAL REPORT	View image in PDF format
04/24/2013 -- ANNUAL REPORT	View image in PDF format
04/23/2012 -- ANNUAL REPORT	View image in PDF format
05/20/2011 -- ANNUAL REPORT	View image in PDF format
05/07/2010 -- ANNUAL REPORT	View image in PDF format
04/17/2009 -- ANNUAL REPORT	View image in PDF format
06/05/2008 -- ANNUAL REPORT	View image in PDF format
04/15/2008 -- ANNUAL REPORT	View image in PDF format
04/20/2007 -- ANNUAL REPORT	View image in PDF format
03/16/2006 -- ANNUAL REPORT	View image in PDF format
04/04/2005 -- ANNUAL REPORT	View image in PDF format
03/22/2004 -- ANNUAL REPORT	View image in PDF format
02/14/2003 -- ANNUAL REPORT	View image in PDF format
01/28/2002 -- ANNUAL REPORT	View image in PDF format
05/14/2001 -- ANNUAL REPORT	View image in PDF format
05/23/2000 -- ANNUAL REPORT	View image in PDF format
03/04/1999 -- ANNUAL REPORT	View image in PDF format
04/13/1998 -- ANNUAL REPORT	View image in PDF format
02/19/1997 -- ANNUAL REPORT	View image in PDF format
06/17/1996 -- ANNUAL REPORT	View image in PDF format
05/01/1995 -- ANNUAL REPORT	View image in PDF format

st.petersburg

Contract/Permit

Contract #: 25419
Date: 07 Nov 2018

User: JSBENNIN
Status: Firm

MUSEUM OF FINE ARTS
JP FATSEAS
255 BEACH DR NE
ST PETERSBURG FL 33701 USA

Primary #: (727) 896-2667
Secondary #: ()
Other #: ()

Purpose of Use: PAINTING IN THE PARK

Expected: 4,000

Co-Sponsored Event

Contract Balance $200.00

Conditions of Use: Insurance Required

Other Information:

Use of beer and wine	Yes
Use of fencing	Yes
Use of liquor	Yes

Date(s) and Time(s) of Use: **Starting: Fri 26 Apr 19 12:00 am** **Ending: Sun 28 Apr 19 11:59 pm**

Facility/Equipment	Day	Date	Time	Fee	Extra Fee	Tax	Total
Special Programs	Fri	26 Apr 2019	12:00 AM	$0.00	$200.00	$0.00	$200.00
Special Event		28 Apr 2019	11:59 PM				

Additional Fees:

Extra Fee	Quantity	Charge	Tax	Total
Co-Sponsored Application Fee	1	$30.00	$0.00	$30.00
				$30.00

Extra Fee - Bookings	Hours	Quantity	Charge	Tax	Total
Co-Sponsored Permit Fee	71:59	1	$200.00	$0.00	$200.00
		1	$200.00	$0.00	$200.00

Charges:

Fees	Extra Fees	Tax	Total	Deposit	Total Applied	Contract Balance	Account Balance
$ 0.00	$230.00	$0.00	$230.00	$0.00	$30.00	$200.00	$200.00

Balance of rental due and payable immediately.

Payments:

Date	Amount	Payment Type	Reference	Receipt Number
12 Oct 2017	$30.00	Check	Rental	2911402

Additional Notes:

I have read this Agreement and agree to comply with the terms and conditions set forth in this Agreement. I also understand this Agreement is not final until approved and executed by the Parks and Recreation Superintendent or designee.

By:(Sign Name) _____

(Print Name) **JP FATSEAS**

MUSEUM OF FINE ARTS
Name of User Organization, If Applicable

CITY OF ST. PETERSBURG, FLORIDA

By:(Sign Name): _____
Parks and Recreation Superintendent

(Print Name) _____
Parks and Recreation Department

Supervisor II / Foreman	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:

The Americans with Disabilities Act (A.D.A.) guarantees equal opportunity for people with disabilities. Special accommodation requests such as sign language interpreters, taped or Braille materials, assistive listening devices, etc., should be made at least one week prior to the activity or program. Individuals using TTD devices, please contact us using the Florida Relay Service at 800-955-8771.

CITY OF ST. PETERSBURG
PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENT APPLICATION

st.petersburg
www.stpete.org

st. petersburg parks & recreation

Date Received: 6/22/18
Check or Cash:
Application #: 88
Packet: C
Permit #: 24332

Event Title: 2019 St Pete Beer & Brunch Festival | Phone No.: 941-812-7400 | Fax No.:

Entity Name: Sideline Apparel, Inc. DBA Brewed Life | Federal I.D. Number: 20-3018546

Event Date(s): 5/11/19 | Location: Albert Whitted Park

Day 1 of Event: 5/11/19 | Time Gates Open: 11am | Ending Time: 6pm

Day 2 of Event: | Time Gates Open: | Ending Time:

Day 3 of Event: | Time Gates Open: | Ending Time:

Application Prepared by: Patrick Green | Phone: 941-812-7400

Title: President | Cell Phone: 941-812-7400

Address: 6314 98th St E | City: Bradenton | State: FL | Zip: 34202

Email Address: brewedlife44@gmail.com

Additional Contact Person: | Day Phone:

What month/year were you incorporated as nonprofit?

List all 501(c)3 entities that will benefit from this event. Pet Pal Animal Shelter

Name of the for-profit entity? Sideline Apparel, Inc. DBA Brewed Life

Describe how this event will contribute to the quality of life in and enhance the image of St. Petersburg.

The St Pete Beer & Brunch Festival will feature brunch themed food, drinks and beer from food trucks/vendors and local brewers. The event allows attendees to sample beers, cocktails and to try new foods from local vendors. Also allows attendees to shop from local vendors.

Describe what economic benefit and impact this event will bring to St. Petersburg.

Local restaurants, breweries, distilleries and other vendors will benefit from new revenue streams as well as advertising & networking.

Each co-sponsored entity must possess liability insurance naming the City of St. Petersburg as an additional insured and secure said insurance in the amount determined by the City.

Does your group presently have liability insurance? [X] YES [ ] NO How much?

Are there plans to sell or distribute beer/wine at your event? [X] YES [ ] NO

Will there be an admission / registration fee? [X] YES [ ] NO Advanced Fee: 10 Day of: 15

Please provide the website address for your event. www.stpetebeerbrunch.com

Please provide a phone number that can be advertised to the public. 941-812-7400

What is the estimated attendance for this event? Spectators 2000 Participants 80 Last Year's Total Attendance N/A

Please check the equipment and/or facilities you are requesting.

Recreation Equipment

Showmobile (Yes/No)

Bleacher(s) needed. Each bleacher approx. 180 people)

Tables (6 ft) # needed Chairs # needed

Public Address System

# of portable risers needed (4 in. x 8 in. x 16 in. sections)

Special Events Facilities

- ☐ Mahaffey Theater
- ☐ Coliseum
- ☐ Sunken Gardens
- ☐ Boyd Hill

☐ Non-City Locations

Which Location?

Albert Whitted Park

The following departments may provide and charge for additional services. You will be provided cost estimates in your Co-sponsored Agreement.

POLICE:	Public Safety Personnel, Marine Services
TRAFFIC:	Personnel, Equipment (cones, barricades, no parking signs)
FIRE:	Paramedics, Inspectors
PARKS SERVICES:	Cleanup Personnel, Dumpster(s), Trash Receptacles, Event Site Preparation and Restoration
RECREATION SERVICES:	On-site Presence, Logistics Help, Liaison with Other Ddepartments

Note: The City does not provide tents, Port-O-Lets, or large quantities of tables and chairs.

I certify that the event will be open to all citizens and that individuals will not be barred from participation due to race, creed, color, national origin, sex, age, or physical impairment. I understand that a financial report of the event is due in the Parks and Recreation office within 30 days of the completion of the event. I also understand that the City is to be shown as a co-sponsor on any promotional materials produced for the event. I agree to obtain the required liability insurance and to secure all necessary city/county/state permits/licenses. I further certify that the facts contained in this application are accurate.

Name:	Patrick Green	Title:	President	Date:	6/21/18
Co-Sign:		Title:		Date:	

NOTE:

a. **If person/entity preparing this application is not representing a nonprofit entity, the application must be co-signed by someone from a sponsoring nonprofit entity. A copy of the sponsoring entity's 501(c)3 designation must accompany this application.**

b. **If your entity has outstanding financial obligations with any department within the City of St. Petersburg, your application will not be processed until debt if paid.**

c. **Applications lacking information or the required completed appendixes listed below will not be processed.**

PLEASE ATTACH THE FOLLOWING

1. Route map for parade, run, walk, and/or bike event.
2. Site map of event and detail schedule of each day's events including open and close times.
3. Complete Appendix B and Appendix C.
4. Check for $30.00 for co-sponsored application processing (non-refundable).
5. Check for park permit fee. See Appendix A for fee structure.
6. A copy of 501(c)3 designation (if applicable)

FOR FURTHER INFORMATION, PLEASE CALL LYNN GORDON, PARKS & RECREATION MANAGER, 727-893-7766 or EMAIL: StPeteEvents@stpete.org

PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENTS
SUMMARY SHEET

Review and check all conditions which apply to this event: Note the corresponding obligation for each condition.

Condition		Obligation
[X] Public Invited		General Liability Insurance
[X] Located in Park		Park Permit
[X] Vending Product / Merchandise Sales		Occupational License
[X] Vending Food / Beverage		Health Inspection
[X] Vendors / Exhibitors	How many?	
[X] Vending Beer / Wine		Alcohol Permit Additional insurance Required
[X] Erecting Tents - Larger than 10ft x 12ft	How many? 4-6	Temporary Structure Permit
[X] Fence Installation	What type? Metal Boundary Fence	Temporary Structure Permit
[ ] Other Structures	What structure?	Temporary Structure Permit
[X] Open Flame Food Preparation		Fire Inspection Permit
[ ] Pyrotechnics		Fireworks Permit
[ ] Require Street Closure		Parade or Street Closure Permit(s)
[X] VIP Area		
[X] Staging	[X] Professional [ ] Showmobile [ ] Other	
[X] Amplified Sound	[X] Performers [ ] Announcement Only	
[X] Security	[X] Daytime - Private [X] Overnight - Private [X] Event Time Frame - SPPD	
[X] Sanitary Facilities - Port-O-Lets	Regular Units 30 Disabled Units 3 Hand Washing 4-6	
[ ] Off-site Parking / Shuttle		
[ ] Semitruck / Tractor Trailer		

Marketing: Please check all that apply.

- [ ] Invitations
- [X] Posters / Flyers
- [X] Newspaper / Internet
- [X] Radio
- [X] Television
- [ ] Remote Broadcast

City logo should be used in any promotional materials, posters, flyers, ads, website, public service announcements, and press releases.

Electrical Requirements:

Does your event require any power needs using more than the standard 110/20amp located in the parks? [X] YES [ ] NO

If YES, check all that apply. [ ] RV'S [X] Coffee Vendors [X] Ice Bins [ ] Freezers [X] Ice Cream Vendors [X] Catering Trucks

[ ] Other:

Please explain the details of the above items checked. Tell us how much and what type of power they would require.

Available power at Albert Whitted should be sufficient

Will you supply your own generators? [ ] YES [X] NO

Will your event have a licensed electrician on-site during the event? [ ] YES [X] NO If YES, who?

Will your event be requesting any variances from City policies or procedures? If YES, please explain.

No

If City permits, licenses, or services are required for event, who will pay for them?

Name: Brewed Life Phone: 941-812-7400

Address (including zip): 6314 98th St E Bradenton, FL 34202

Type of music, # of stages, and # of bands.

Rock/Pop Music. One Stage. 3-4 bands

List Vending Products. Name & Provider.

Various food, beer, cocktails,wine and other items from a large amount of vendors.

For Use of Beer/Wine - Please provide name, address and phone number of the sponsoring 501(c)3 or catering company.

Pet Pal Animal Shelter -
405 22nd St S
St. Petersburg, FL 33712

Explain subject/purpose of all speeches/demonstrations which will occur.

Discuss your load in/load out parking needs, include times and dates.

Other Comments: Please describe your fee structure.

Other comments:

I represent and warrant that the purpose of the proposed activity/event and conduct of the sponsor(s) and the participants shall conform to all requirements of law and all ordinances of the State of Florida, Pinellas County, and the City of St. Petersburg including, but not limited to, City noise ordinances and Parks and Recreation Department Policies and Procedures. I acknowledge that failure to observe such laws, ordinances, or policies and procedures will result in an immediate cancellation of the event and all permits.

WITHOUT LIMITING THE GENERALITY OF THE FOREGOING, I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE PARKS AND RECREATION DEPARTMENT POLICIES AND PROCEDURES PERTAINING TO THE USE OF PARKS AND THE PARK RULES SET FORTH IN ARTICLE II, CHAPTER 21, OF THE ST. PETERSBURG CITY CODE, INCLUDING BUT NOT LIMITED TO THE INDEMNIFICATION AND INSPECTION OBLIGATIONS ASSUMED BY ME AND THE PERSON OR ENTITY ON WHOSE BEHALF THIS APPLICATION IS BEING MADE.

I certify that the facts contained in this application are accurate.

Name: Patrick Green Title: President Date: 3/26/17

Appendix A

Co-Sponsored Event Park Fee Structure

* Events in Vinoy Park will be assessed $300.00 per event day (e.g.,1 day event = $300.00, 2 days = $600.00, 3 days or more = $900.00.) This includes the $30.00 park permit fee.

* Events in any other park will be assessed $200.00 per event day (e.g., 1 day event = $200.00, 2 days = $400.00, 3 or more days = $600.00). This includes the $30.00 park permit fee.

* The above fees will be due at the time you submit your application plus the $30.00 co-sponsored application fee.

* All co-sponsored event applications must be submitted at least 6 month prior to the event.

* Any application for a co-sponsored event submitted inside the six (6) month time frame will be assessed a non refundable $1,200.00 late fee.

* **The City requires payment in advance for all City services estimated and/or provided for first time events and one of a kind nonrecurring events.**

* **Payment will be required at least ten (10) business days prior to the start of the event and shall be in the form of cash, certified check, or an irrevocable bank letter of credit.**

* **All first time entities requesting events will be required to complete a credit application.**

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Appendix B
President or CEO
Responsible Party Information

Please complete the information below for each responsible party.

Name of the **Nonprofit** Corporation: Pet Pal Animal Shelter

Name of Responsible Party (President or CEO ONLY): June Liggins

Title of Responsible Party: President

Physical Address of Responsible Party: 405 22nd Street South St. Pete FL 33712

Phone Number of Responsible Party: 727-328-7738 or 813-505-6148

Email Address of Responsible Party: Gracie@petpalanimalshelter.com

Nonprofit (Employee Identification Number): 59-2967819

Name of the **For-profit** Corporation: Sideline Apparel Inc. DBA Brewed Life

Name of Responsible Party (President or CEO ONLY): Patrick Green

Title of Responsible Party: President

Physical Address of Responsible Party: 6314 98th St E, Bradenton, FL 34202

Phone Number of Responsible Party: 941-812-7400

Email Address of Responsible Party: brewedlife44@gmail.com

For-profit (Employee Identification Number) 20-3018546

Please include a copy of the the current IRS Nonprofit Affidavit / For Profit

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www.stpete.org

APPENDIX C
STATEMENT OF REVENUE AND EXPENSES FORM
PRIOR YEAR'S EVENT
(Must be completed)

Name of Event:

Date(s) of Event:

I. REVENUE SOURCES (attach sheet if more space is needed)

		Amount
1.		
2.		
3.		
4		
5.		
6.		
7.		
8.		
	TOTAL GROSS REVENUE	

II. EXPENSES (attach sheet if more space is needed)

1.		
2.		
3.		
4		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
	TOTAL OPERATING EXPENSES	
	TOTAL NET INCOME	

III. ALLOCATION OF NET INCOME (attach sheet if more space is needed)

1.		
2.		
3.		
4.		
5.		
6.		
	TOTAL ALLOCATION OF NET INCOME	

Prepared by:

Date:

Print Application

Submit Application by Email

Florida Department of State

DIVISION OF CORPORATIONS

Department of State / Division of Corporations / Search Records / Search by FEI/EIN Number /

Detail by FEI/EIN Number

Florida Not For Profit Corporation
PET PAL RESCUE, INC.

Filing Information

Document Number	N28933
FEI/EIN Number	59-2967819
Date Filed	10/19/1988
State	FL
Status	ACTIVE
Last Event	AMENDMENT
Event Date Filed	07/13/2017
Event Effective Date	NONE

Principal Address

405 22ND STREET SOUTH
ST. PETERSBURG, FL 33712

Changed: 04/27/2006

Mailing Address

405 22ND STREET SOUTH
ST. PETERSBURG, FL 33712

Changed: 04/27/2006

Registered Agent Name & Address

DALY, SCOTT A
405 22ND ST S.
ST. PETE, FL 33712

Name Changed: 10/25/2013

Address Changed: 10/25/2013

Officer/Director Detail

Name & Address

Title President

LIGGINS, JUNE
405 22ND STREET SOUTH
ST. PETERSBURG, FL 33712

Title Director, Treasurer

DALY, SCOTT
405 22ND STREET SOUTH
ST. PETERSBURG, FL 33712

Title Director

MEAD, JOHN, DVM
405 22nd St S
ST PETERSBURG, FL 33712

Title Secretary

GERSON, SHARON
405 22ND STREET SOUTH
ST. PETERSBURG, FL 33712

Annual Reports

Report Year	Filed Date
2016	03/08/2016
2017	02/01/2017
2018	02/08/2018

Document Images

02/08/2018 -- ANNUAL REPORT	View image in PDF format
07/13/2017 -- Amendment	View image in PDF format
02/01/2017 -- ANNUAL REPORT	View image in PDF format
09/12/2016 -- Off/Dir Resignation	View image in PDF format
03/08/2016 -- ANNUAL REPORT	View image in PDF format
04/28/2015 -- ANNUAL REPORT	View image in PDF format
07/11/2014 -- AMENDED ANNUAL REPORT	View image in PDF format
06/24/2014 -- Off/Dir Resignation	View image in PDF format
03/20/2014 -- ANNUAL REPORT	View image in PDF format
10/25/2013 -- Amendment	View image in PDF format
02/04/2013 -- ANNUAL REPORT	View image in PDF format
09/20/2012 -- ANNUAL REPORT	View image in PDF format
06/15/2012 -- ANNUAL REPORT	View image in PDF format
10/06/2011 -- ANNUAL REPORT	View image in PDF format
03/03/2011 -- ANNUAL REPORT	View image in PDF format
09/21/2010 -- ANNUAL REPORT	View image in PDF format
01/06/2010 -- ANNUAL REPORT	View image in PDF format
02/24/2009 -- ANNUAL REPORT	View image in PDF format
01/15/2008 -- ANNUAL REPORT	View image in PDF format
01/03/2007 -- ANNUAL REPORT	View image in PDF format
04/27/2006 -- ANNUAL REPORT	View image in PDF format
10/07/2005 -- REINSTATEMENT	View image in PDF format
03/09/2004 -- ANNUAL REPORT	View image in PDF format

01/10/2003 -- ANNUAL REPORT	View image in PDF format
08/15/2002 -- ANNUAL REPORT	View image in PDF format
04/28/2001 -- ANNUAL REPORT	View image in PDF format
05/23/2000 -- ANNUAL REPORT	View image in PDF format
04/13/1999 -- ANNUAL REPORT	View image in PDF format
04/23/1998 -- ANNUAL REPORT	View image in PDF format
04/25/1997 -- ANNUAL REPORT	View image in PDF format
04/29/1996 -- ANNUAL REPORT	View image in PDF format
05/01/1995 -- ANNUAL REPORT	View image in PDF format

Florida Department of State, Division of Corporations

Florida Department of State

DIVISION OF CORPORATIONS

Department of State / Division of Corporations / Search Records / Search by FEI/EIN Number /

Detail by FEI/EIN Number

Florida Profit Corporation
SIDELINE APPAREL, INC.

Filing Information

Document Number	P05000086188
FEI/EIN Number	20-3018546
Date Filed	06/15/2005
Effective Date	06/15/2005
State	FL
Status	ACTIVE
Last Event	REINSTATEMENT
Event Date Filed	12/01/2017

Principal Address

6314 98TH STREET EAST
BRADENTON, FL 34202

Mailing Address

6314 98TH STREET EAST
BRADENTON, FL 34202

Registered Agent Name & Address

GREEN, PATRICK J
6314 98TH STREET EAST
BRADENTON, FL 34202

Name Changed: 12/01/2017

Officer/Director Detail

Name & Address

Title PRES

GREEN, PATRICK J
6314 98TH STREET EAST
BRADENTON, FL 34202

Annual Reports

Report Year	Filed Date
2016	01/26/2016
2017	12/01/2017
2018	02/10/2018

Document Images

02/10/2018 -- ANNUAL REPORT	View image in PDF format
12/01/2017 -- REINSTATEMENT	View image in PDF format
01/26/2016 -- ANNUAL REPORT	View image in PDF format
04/22/2015 -- ANNUAL REPORT	View image in PDF format
02/26/2014 -- ANNUAL REPORT	View image in PDF format
02/06/2013 -- ANNUAL REPORT	View image in PDF format
02/15/2012 -- ANNUAL REPORT	View image in PDF format
02/28/2011 -- ANNUAL REPORT	View image in PDF format
02/17/2010 -- ANNUAL REPORT	View image in PDF format
04/16/2009 -- ANNUAL REPORT	View image in PDF format
04/09/2008 -- ANNUAL REPORT	View image in PDF format
01/04/2007 -- ANNUAL REPORT	View image in PDF format
07/03/2006 -- ANNUAL REPORT	View image in PDF format
06/15/2005 -- Domestic Profit	View image in PDF format

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Contract/Permit

Contract #: 24332
Date: 17 Jul 2018

User: RBMCCULL
Status: Firm

BREWED LIFE
PATRICK GREEN
6314 98TH ST E
BRADENTON FL 34202 USA

Primary #: (941) 812-7400
Secondary #: (727)
Other #: ()

Purpose of Use: 2019 St. Pete Beer and Brunch Festival **Expected: 2,200** **Co-Sponsored Event** **Contract Balance** $0.00

Conditions of Use: Insurance Required

Other Information:

Use of beer and wine	Yes
Use of fencing	Yes
Use of liquor	Yes

Date(s) and Time(s) of Use: **Starting: Fri 10 May 19 08:00 am** **Ending: Sat 11 May 19 09:00 pm**

Facility/Equipment	Day	Date	Time	Fee	Extra Fee	Tax	Total
Albert Whitted Park	Fri	10 May 2019	08:00 AM	$0.00	$200.00	$0.00	$200.00
Park		11 May 2019	09:00 PM				

Additional Fees:

Extra Fee	Quantity	Charge	Tax	Total
Co-Sponsored Application Fee	1	$30.00	$0.00	$30.00
				$30.00

Extra Fee - Bookings	Hours	Quantity	Charge	Tax	Total
Co-Sponsored Permit Fee	37:00	1	$200.00	$0.00	$200.00
		1	$200.00	$0.00	$200.00

Charges:

Fees	Extra Fees	Tax	Total	Deposit	Total Applied	Contract Balance	Account Balance
$ 0.00	$230.00	$0.00	$230.00	$0.00	$230.00	$0.00	$0.00

Balance of rental due and payable immediately.

Payments:

Date	Amount	Payment Type	Reference	Receipt Number
01 Oct 2018	$230.00	Check	Rental	3168657

Additional Notes:

I have read this Agreement and agree to comply with the terms and conditions set forth in this Agreement. I also understand this Agreement is not final until approved and executed by the Parks and Recreation Superintendent or designee.

By:(Sign Name) _____

(Print Name) **PATRICK GREEN**

BREWED LIFE
Name of User Organization, If Applicable

CITY OF ST. PETERSBURG, FLORIDA

By:(Sign Name): _____
Parks and Recreation Superintendent

(Print Name) _____
Parks and Recreation Department

_____ Supervisor II / Foreman	☐ Approved or	☐ Rejected	Date: _____
_____ Manager	☐ Approved or	☐ Rejected	Date: _____
_____ Manager	☐ Approved or	☐ Rejected	Date: _____

The Americans with Disabilities Act (A.D.A.) guarantees equal opportunity for people with disabilities. Special accommodation requests such as sign language interpreters, taped or Braille materials, assistive listening devices, etc., should be made at least one week prior to the activity or program. Individuals using TTD devices, please contact us using the Florida Relay Service at 800-955-8771.

CITY OF ST. PETERSBURG
PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENT APPLICATION

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st. petersburg parks & recreation

Date Received: Nov 8, 2018
Check or Cash: Ck Sent
Application #: 89
Packet: C
Permit #: 25476

Event Title: Tampa Bay Caribbean Carnival /St Petersburg Caribbea Phone No.: 7274344282 Fax No.:

Entity Name: Trinidad & Tobago American Association Of Central Fl, Inc. Federal I.D. Number: 85-8013627146c-1

Event Date(s): 8th & 9th Location: Albert Whitted Park

Day 1 of Event: 8th June Time Gates Open: 1pm Ending Time: 10pm

Day 2 of Event: 9th June Time Gates Open: 1pm Ending Time: 10pm

Day 3 of Event: Time Gates Open: Ending Time:

Application Prepared by: George Carrington Phone:

Title: President Cell Phone: 7274344282

Address: 3150 Pinellas Point Drive S City: St Petersburg State: Fl Zip: 33712

Email Address: carringtongeorge@hotmail.com

Additional Contact Person: Peter Prince Day Phone: 3523489897

What month/year were you incorporated as nonprofit? 1990

List all 501(c)3 entities that will benefit from this event. Trinidad & Tobago American Association Of Central Fl, Inc

Name of the for-profit entity? Na

Describe your event with details.

Tampa Bay Caribbean Carnival highlights the unique variety of culture found in the Caribbean. During the Weekend of this event - June 9thand 10th - The City of St Petersburg will become the epicenter of diversified culture .Participant from Tampa, St Pete, and surrounding Cities and Counties ,including a few from our neighboring State - Georgia -and as far as New York , will descend upon St Pete to enjoy the Tampa Bay Caribbean Carnival / St Petersburg Caribbean Festivities .
The Tampa Bay Caribbean Carnival St Petersburg Caribbean Festival, unifies different demographics to join as one , as they enjoy the rich and historical Caribbean event showcasing the ethnic foods , music, and colorful parades in costumes that is associated with Caribbean Culture. Local residents and visitors of St Petersburg alike will experience the rich culture of the Tampa Bay Caribbean Community.

Describe what economic benefit and impact this event will bring to St. Petersburg.

Our guest for this event will be in need of lodging and dining opportunities , not to exclude shopping and transportation . Local businesses, will quickly benefit from the economical impact of the event.

Each co-sponsored entity must possess liability insurance naming the City of St. Petersburg as an additional insured and secure said insurance in the amount determined by the City.

Does your group presently have liability insurance? ☐ YES ☐ NO How much? $1,000,000.00

Are there plans to sell or distribute beer/wine at your event? ☐ YES ☐ NO

Will there be an admission / registration fee? ☐ YES ☐ NO Advanced Fee: $20 Day of: $25

Please provide the website address for your event. tampacarnival.com

Please provide a phone number that can be advertised to the public.

What is the estimated attendance for this event? Spectators 7,000.00 Participants 1,000,00 Last Year's Total Attendance 3,000.00

Please check the equipment and/or facilities you are requesting.

Recreation Equipment

Showmobile (Yes/No) yes

Bleacher(s) needed. Each bleacher approx. 180 people)

Tables (6 ft) # needed 40 Chairs # needed 60

Public Address System no

# of portable risers needed (4 in. x 8 in. x 16 in. sections) yes

Special Events Facilities

- ☐ Mahaffey Theater
- ☐ Coliseum
- ☐ Sunken Gardens
- ☐ Boyd Hill

☐ Non-City Locations

Which Location?

Albert Whitted Park

The following departments may provide and charge for additional services. You will be provided cost estimates in your Co-sponsored Agreement.

POLICE:	Public Safety Personnel, Marine Services
TRAFFIC:	Personnel, Equipment (cones, barricades, no parking signs)
FIRE:	Paramedics, Inspectors
PARKS SERVICES:	Cleanup Personnel, Dumpster(s), Trash Receptacles, Event Site Preparation and Restoration
RECREATION SERVICES:	On-site Presence, Logistics Help, Liaison with Other Ddepartments

Note: The City does not provide tents, Port-O-Lets, or large quantities of tables and chairs.

I certify that the event will be open to all citizens and that individuals will not be barred from participation due to race, creed, color, national origin, sex, age, or physical impairment. I understand that a financial report of the event is due in the Parks and Recreation office within 30 days of the completion of the event. I also understand that the City is to be shown as a co-sponsor on any promotional materials produced for the event. I agree to obtain the required liability insurance and to secure all necessary city/county/state permits/licenses. I further certify that the facts contained in this application are accurate.

Name:	George Carrington	Title:	President	Date:	11/3/2018
Co-Sign:	Peter Prince	Title:	Vice President	Date:	11/3/18

NOTE:

a. **If person/entity preparing this application is not representing a nonprofit entity, the application must be co-signed by someone from a sponsoring nonprofit entity. A copy of the sponsoring entity's 501(c)3 designation must accompany this application.**

b. **If your entity has outstanding financial obligations with any department within the City of St. Petersburg, your application will not be processed until debt if paid.**

c. **Applications lacking information or the required completed appendixes listed below will not be processed.**

PLEASE ATTACH THE FOLLOWING

1. Route map for parade, run, walk, and/or bike event.
2. Site map of event and detail schedule of each day's events including open and close times.
3. Complete Appendix B and Appendix C.
4. Check for $30.00 for co-sponsored application processing (non-refundable).
5. Check for park permit fee. See Appendix A for fee structure.
6. A copy of 501(c)3 designation (if applicable)

FOR FURTHER INFORMATION, PLEASE CALL LYNN GORDON, PARKS & RECREATION MANAGER, 727-893-7766 or EMAIL: StPeteEvents@stpete.org

st.petersburg
www.stpete.org

PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENTS
SUMMARY SHEET

st. petersburg parks & recreation

Review and check all conditions which apply to this event: Note the corresponding obligation for each condition.

Condition		Obligation
☒ Public Invited		General Liability Insurance
☒ Located in Park		Park Permit
☒ Vending Product / Merchandise Sales		Occupational License
☒ Vending Food / Beverage		Health Inspection
☒ Vendors / Exhibitors	How many? Over 30 Vendors / Exhibitors	
☒ Vending Beer / Wine		Alcohol Permit Additional insurance Required
☒ Erecting Tents - Larger than 10ft x 12ft	How many? 6	Temporary Structure Permit
☒ Fence Installation	What type? wire	Temporary Structure Permit
☒ Other Structures	What structure? stage	Temporary Structure Permit
☐ Open Flame Food Preparation		Fire Inspection Permit
☐ Pyrotechnics		Fireworks Permit
☒ Require Street Closure		Parade or Street Closure Permit(s)
☒ VIP Area		
☒ Staging	☒ Professional ☒ Showmobile ☐ Other	
☒ Amplified Sound	☒ Performers ☐ Announcement Only	
☒ Security	☒ Daytime - Private ☒ Overnight - Private ☒ Event Time Frame - SPPD	
☒ Sanitary Facilities - Port-O-Lets	Regular Units 30 Disabled Units 4 Hand Washing 6	
☒ Off-site Parking / Shuttle		
☐ Semitruck / Tractor Trailer		

Marketing: Please check all that apply.

- ☒ Invitations
- ☒ Posters / Flyers
- ☒ Newspaper / Internet
- ☒ Radio
- ☒ Television
- ☐ Remote Broadcast

City logo should be used in any promotional materials, posters, flyers, ads, website, public service announcements, and press releases.

Electrical Requirements:

Does your event require any power needs using more than the standard 110/20amp located in the parks? ☐ YES ☐ NO

If YES, check all that apply. ☒ RV'S ☐ Coffee Vendors ☒ Ice Bins ☒ Freezers ☒ Ice Cream Vendors ☒ Catering Trucks ☒ Other:

Please explain the details of the above items checked. Tell us how much and what type of power they would require.

Sound Stage

R V' S

Will you supply your own generators? ☐ YES ☒ NO

Will your event have a licensed electrician on-site during the event? ☒ YES ☐ NO If YES, who? na

Will your event be requesting any variances from City policies or procedures? If YES, please explain.

no

If City permits, licenses, or services are required for event, who will pay for them?

Name: Tampa Bay Caribbean Carnival / St Petersburg Caribbean Festival Phone: 7274344282

Address (including zip): 3150 Pinellas Point Drive S , St Petersburg Fl ,33712

Type of music, # of stages, and # of bands.

1 Stage
Caribbean and American Music
5 Bands

List Vending Products. Name & Provider.

Authentic Caribbean / American and international Food and Drinks
Various Venders

For Use of Beer/Wine - Please provide name, address and phone number of the sponsoring 501(c)3 or catering company.

na

Explain subject/purpose of all speeches/demonstrations which will occur.

Discuss your load in/load out parking needs, include times and dates.

Wednesday 5th June 8am to 5pm, Load In
Monday 10th June 8am to 4pm

Other Comments: Please describe your fee structure.

$20.00 advance
$25.00 Day of
Kids 10 and under Free

Other comments:

I represent and warrant that the purpose of the proposed activity/event and conduct of the sponsor(s) and the participants shall conform to all requirements of law and all ordinances of the State of Florida, Pinellas County, and the City of St. Petersburg including, but not limited to, City noise ordinances and Parks and Recreation Department Policies and Procedures. I acknowledge that failure to observe such laws, ordinances, or policies and procedures will result in an immediate cancellation of the event and all permits.

WITHOUT LIMITING THE GENERALITY OF THE FOREGOING, I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE PARKS AND RECREATION DEPARTMENT POLICIES AND PROCEDURES PERTAINING TO THE USE OF PARKS AND THE PARK RULES SET FORTH IN ARTICLE II, CHAPTER 21, OF THE ST. PETERSBURG CITY CODE, INCLUDING BUT NOT LIMITED TO THE INDEMNIFICATION AND INSPECTION OBLIGATIONS ASSUMED BY ME AND THE PERSON OR ENTITY ON WHOSE BEHALF THIS APPLICATION IS BEING MADE.

I certify that the facts contained in this application are accurate.

Name: George Carrington Title: President Date: 11/3/2018

Appendix A

Co-Sponsored Event Park Fee Structure

* Events in Vinoy Park will be assessed $300.00 per event day (e.g.,1 day event = $300.00, 2 days = $600.00, 3 days or more = $900.00.) This includes the $30.00 park permit fee.

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* All co-sponsored event applications must be submitted at least 6 month prior to the event.

* Any application for a co-sponsored event submitted inside the six (6) month time frame will be assessed a non refundable $1,200.00 late fee.

* **The City requires payment in advance for all City services estimated and/or provided for first time events and one of a kind nonrecurring events.**

* **Payment will be required at least ten (10) business days prior to the start of the event and shall be in the form of cash, certified check, or an irrevocable bank letter of credit.**

* **All first time entities requesting events will be required to complete a credit application.**

Appendix B
President or CEO
Responsible Party Information

Please complete the information below for each responsible party.

Name of the **Nonprofit** Corporation:	Trinidad And Tobago American Association Of Central Fl, Inc
Name of Responsible Party (President or CEO ONLY):	George Carrington
Title of Responsible Party:	President
Physical Address of Responsible Party:	3150 Pinellas Point Drive S, St Petersburg Fl 33712
Phone Number of Responsible Party:	7274344282
Email Address of Responsible Party:	carringtongeorge@hotmail.com
Nonprofit (Employee Identification Number):	59-3363879

Name of the **For-profit** Corporation:	
Name of Responsible Party (President or CEO ONLY):	
Title of Responsible Party:	
Physical Address of Responsible Party:	
Phone Number of Responsible Party:	
Email Address of Responsible Party:	
For-profit (Employee Identification Number)	

Please include a copy of the the current IRS Nonprofit Affidavit / For Profit

What method of invoicing would your organization prefer?

☒ BY Mail

Contact Name	Trinidad and Tobago American Association Of Central Fl, Inc.
Address	3150 Pinellas point Drive s,
City, State, Zip	St Petersburg Fl, 33712

☒ BY EMAIL

Email Address:	carringtongeorge@hotmail.com

APPENDIX C
STATEMENT OF REVENUE AND EXPENSES FORM
PRIOR YEAR'S EVENT
(Must be completed)

Name of Event: Tampa Bay Caribbean Carnival/ St Peter
Date(s) of Event: June 8th& (th - 2019

I. REVENUE SOURCES (attach sheet if more space is needed)

		Amount
1.	na	
2.	na	
3.	Vendors	$20,000.00
4	Gates receipts	$105,000.00
5.	Bar water Sodars ,etc	$20,000.00
6.		
7.		
8.		$145,000.00
	TOTAL GROSS REVENUE	

II. EXPENSES (attach sheet if more space is needed)

1.	Park ,Police ,Clean up	$28,000.00
2.	Sound and Stage	$15,000.00
3.	Insurance	$2,700.00
4	Permits ,Water License	$1,000.00
5.	Marketing- Media , Flyers ,Social Media	$12,000.00
6.	Entertainment	$50,000.00
7.	Artiste Accommodation and Transportation	$5,000.00
8.	Security	$$3,000.00
9.	Miscellaneous, Meals , Phones Radios , Gulf Carts, Etc.	$2,500.00
10.	Fence	$2,000.00
11.	Tents	$ 4,100.00
12.	Printing	$5,700.00
	TOTAL OPERATING EXPENSES	
	TOTAL NET INCOME	

III. ALLOCATION OF NET INCOME (attach sheet if more space is needed)

1.		$131,00.00
2.		
3.		
4.		
5.		
6.		$14,000.00
	TOTAL ALLOCATION OF NET INCOME	

Prepared by: George Carrington Date: 11/3/2018

Print Application

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Florida Department of State

DIVISION OF CORPORATIONS

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Detail by Entity Name

Florida Not For Profit Corporation

TRINIDAD & TOBAGO AMERICAN ASSOCIATION OF CENTRAL FLORIDA, INC.

Filing Information

Document Number	N96000000677
FEI/EIN Number	59-3363879
Date Filed	02/05/1996
State	FL
Status	ACTIVE
Last Event	REINSTATEMENT
Event Date Filed	05/23/2014

Principal Address

3150 PINELLAS POINT DR S
APT 3
ST PETERSBURG, FL 33712

Changed: 05/23/2014

Mailing Address

3150 PINELLAS POINT DR S
APT 3
ST PETERSBURG, FL 33712

Changed: 05/23/2014

Registered Agent Name & Address

CARRINGTON, GEORGE
3150 PINELLAS POINT DR S
APT 3
ST PETERSBURG, FL 33712

Name Changed: 06/06/2002

Address Changed: 05/23/2014

Officer/Director Detail

Name & Address

Title T

TROTMAN, JENNIFER

3150 PINELLAS POINT DR S APT 3
ST PETERSBURG, FL 33712

Title President

CARRINGTON, GEORGE
3150 PINELLAS PT DR
ST PETERSBURG, FL 33712

Title VP

Carrington, Chad
578 1st Ave North
St Petersburg, FL 33701

Title Director

Carrington , Geofran
578 1st Ave North
St. Petersburg, FL 33701

Title Executive Secretary

Gonzalez, Katherine
578 1st Ave North
St.Petersburg, FL 33701

Annual Reports

Report Year	Filed Date
2016	04/29/2016
2017	03/30/2017
2018	04/14/2018

Document Images

05/21/2018 -- Off/Dir Resignation	View image in PDF format
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04/29/2016 -- ANNUAL REPORT	View image in PDF format
01/02/2015 -- ANNUAL REPORT	View image in PDF format
12/12/2014 -- AMENDED ANNUAL REPORT	View image in PDF format
12/10/2014 -- AMENDED ANNUAL REPORT	View image in PDF format
05/23/2014 -- REINSTATEMENT	View image in PDF format
09/27/2012 -- ANNUAL REPORT	View image in PDF format
01/07/2011 -- REINSTATEMENT	View image in PDF format
10/28/2009 -- REINSTATEMENT	View image in PDF format
03/03/2008 -- REINSTATEMENT	View image in PDF format
05/15/2006 -- REINSTATEMENT	View image in PDF format
02/13/2004 -- REINSTATEMENT	View image in PDF format
06/06/2002 -- REINSTATEMENT	View image in PDF format
02/06/1998 -- ANNUAL REPORT	View image in PDF format

01/31/1997 -- ANNUAL REPORT	View image in PDF format
02/05/1996 -- DOCUMENTS PRIOR TO 1997	View image in PDF format

Florida Department of State, Division of Corporations

st.petersburg

Contract/Permit

Contract #: 25476
Date: 14 Nov 2018

User: JSBENNIN
Status: Firm

TRINIDAD & TOBAGO AMERICAN ASSOCIATION
GEORGE CARRINGTON
3150 PINELLAS POINTE DR
ST PETERSBURG FL 33712 USA

Primary #: (727) 434-4282
Secondary #: ()
Other #: ()

Purpose of Use: CARIBBEAN CARNIVAL

Expected: 7,000

Co-Sponsored Event

Contract Balance $230.00

Conditions of Use: Insurance Required

Other Information:

Use of beer and wine	Yes
Use of fencing	Yes
Use of liquor	Yes

Date(s) and Time(s) of Use: Starting: Thu 06 Jun 19 06:00 am Ending: Tue 11 Jun 19 09:00 pm

Facility/Equipment	Day	Date	Time	Fee	Extra Fee	Tax	Total
Albert Whitted Park	Thu	06 Jun 2019	06:00 AM	$0.00	$200.00	$0.00	$200.00
Park		11 Jun 2019	09:00 PM				

Additional Fees:

Extra Fee	Quantity	Charge	Tax	Total
Co-Sponsored Application Fee	1	$30.00	$0.00	$30.00
				$30.00

Extra Fee - Bookings	Hours	Quantity	Charge	Tax	Total
Co-Sponsored Permit Fee	135:00	1	$200.00	$0.00	$200.00
		1	$200.00	$0.00	$200.00

Charges:

Fees	Extra Fees	Tax	Total	Deposit	Total Applied	Contract Balance	Account Balance
$ 0.00	$230.00	$0.00	$230.00	$0.00	$0.00	$230.00	$290.00

Balance of rental due and payable immediately.

Payments:

Additional Notes:

I have read this Agreement and agree to comply with the terms and conditions set forth in this Agreement. I also understand this Agreement is not final until approved and executed by the Parks and Recreation Superintendent or designee.

By:(Sign Name) _____

(Print Name) **GEORGE CARRINGTON**

TRINIDAD & TOBAGO AMERICAN ASSOCIATION
Name of User Organization, If Applicable

CITY OF ST. PETERSBURG, FLORIDA

By:(Sign Name): _____
Parks and Recreation Superintendent

(Print Name) _____
Parks and Recreation Department

Supervisor II / Foreman	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:

The Americans with Disabilities Act (A.D.A.) guarantees equal opportunity for people with disabilities. Special accommodation requests such as sign language interpreters, taped or Braille materials, assistive listening devices, etc., should be made at least one week prior to the activity or program. Individuals using TTD devices, please contact us using the Florida Relay Service at 800-955-8771.

CITY OF ST. PETERSBURG
PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENT APPLICATION

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st. petersburg parks & recreation

Date Received: 11-6-18
Check or Cash:
Application #: 90
Packet: D
Permit #: 25479

Event Title: Extreme Mud Wars Phone No.: 8778202582 Fax No.:

Entity Name: Active Endeavors Inc dba Tampa Bay Club Sport Federal I.D. Number: 26-0016418

Event Date(s): 7/13/18 Location: Lake Vista Park

Day 1 of Event: 7/13/18 Time Gates Open: 8:30 AM Ending Time: 4pm

Day 2 of Event: Time Gates Open: Ending Time:

Day 3 of Event: Time Gates Open: Ending Time:

Application Prepared by: Chris Giebner Phone: 877-820-2582, ext 2

Title: owner Cell Phone: 727-420-6868

Address: 380 105th Terrace NE City: St Pete State: FL Zip: 33716

Email Address: chris@tampabayclubsport.com

Additional Contact Person: Ian Elston Day Phone: 727-804-0648

What month/year were you incorporated as nonprofit? n/a

List all 501(c)3 entities that will benefit from this event. TASCO, Hand4Hope, Pier Aquarium

Name of the for-profit entity? Active Endeavors, Inc d/b/a Tampa Bay Club Sport

Describe how this event will contribute to the quality of life in and enhance the image of St. Petersburg.

Provide unique recreational opportunities to residents.

Describe what economic benefit and impact this event will bring to St. Petersburg.

Bring 1000+ young professionals downtown with spending money. 2015 economic impact is estimated at $15-20K on top of team fees.

Each co-sponsored entity must possess liability insurance naming the City of St. Petersburg as an additional insured and secure said insurance in the amount determined by the City.

Does your group presently have liability insurance? ☒ YES ☐ NO How much? $2000000

Are there plans to sell or distribute beer/wine at your event? ☒ YES ☐ NO

Will there be an admission / registration fee? ☒ YES ☐ NO Advanced Fee: 300 Day of: 0

Please provide the website address for your event. www.ExtremeMudWars.com

Please provide a phone number that can be advertised to the public. 877-820-2582 ext2

What is the estimated attendance for this event? Spectators 150 Participants 400 Last Year's Total Attendance 550

Please check the equipment and/or facilities you are requesting.

Recreation Equipment

Showmobile (Yes/No) yes

Bleacher(s) needed. Each bleacher approx. 180 people) 1-2

Tables (6 ft) # needed per tasco Chairs # needed per tasco

Public Address System

# of portable risers needed (4 in. x 8 in. x 16 in. sections)

Special Events Facilities

- ☐ Mahaffey Theater
- ☐ Coliseum
- ☐ Sunken Gardens
- ☐ Boyd Hill

☐ Non-City Locations

Which Location?

Lake Vista Park

The following departments may provide and charge for additional services. You will be provided cost estimates in your Co-sponsored Agreement.

POLICE:	Public Safety Personnel, Marine Services
TRAFFIC:	Personnel, Equipment (cones, barricades, no parking signs)
FIRE:	Paramedics, Inspectors
PARKS SERVICES:	Cleanup Personnel, Dumpster(s), Trash Receptacles, Event Site Preparation and Restoration
RECREATION SERVICES:	On-site Presence, Logistics Help, Liaison with Other Ddepartments

Note: The City does not provide tents, Port-O-Lets, or large quantities of tables and chairs.

I certify that the event will be open to all citizens and that individuals will not be barred from participation due to race, creed, color, national origin, sex, age, or physical impairment. I understand that a financial report of the event is due in the Parks and Recreation office within 30 days of the completion of the event. I also understand that the City is to be shown as a co-sponsor on any promotional materials produced for the event. I agree to obtain the required liability insurance and to secure all necessary city/county/state permits/licenses. I further certify that the facts contained in this application are accurate.

Name:	Chris Giebner	Title:	owner	Date:	11/6/18
Co-Sign:	(Tasco)	Title:		Date:	

NOTE:

a. **If person/entity preparing this application is not representing a nonprofit entity, the application must be co-signed by someone from a sponsoring nonprofit entity. A copy of the sponsoring entity's 501(c)3 designation must accompany this application.**

b. **If your entity has outstanding financial obligations with any department within the City of St. Petersburg, your application will not be processed until debt if paid.**

c. **Applications lacking information or the required completed appendixes listed below will not be processed.**

PLEASE ATTACH THE FOLLOWING

1. Route map for parade, run, walk, and/or bike event.
2. Site map of event and detail schedule of each day's events including open and close times.
3. Complete Appendix B and Appendix C.
4. Check for $30.00 for co-sponsored application processing (non-refundable).
5. Check for park permit fee. See Appendix A for fee structure.
6. A copy of 501(c)3 designation (if applicable)

FOR FURTHER INFORMATION, PLEASE CALL JOHN ARMBRUSTER, PARKS & RECREATION MANAGER, 727-893-7766 or EMAIL: StPeteEvents@stpete.org

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www.stpete.org

PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENTS
SUMMARY SHEET

st. petersburg parks & recreation

Review and check all conditions which apply to this event: Note the corresponding obligation for each condition.

Condition		Obligation
[X] Public Invited		General Liability Insurance
[X] Located in Park		Park Permit
[ ] Vending Product / Merchandise Sales		Occupational License
[X] Vending Food / Beverage		Health Inspection
[X] Vendors / Exhibitors	How many? 1 - 10 Vendors / Exhibitors	
[X] Vending Beer / Wine		Alcohol Permit Additional insurance Required
[X] Erecting Tents - Larger than 10ft x 12ft	How many? tasco	Temporary Structure Permit
[ ] Fence Installation	What type?	Temporary Structure Permit
[ ] Other Structures	What structure?	Temporary Structure Permit
[ ] Open Flame Food Preparation		Fire Inspection Permit
[ ] Pyrotechnics		Fireworks Permit
[ ] Require Street Closure		Parade or Street Closure Permit(s)
[ ] VIP Area		
[X] Staging	[ ] Professional [X] Showmobile [ ] Other	
[X] Amplified Sound	[ ] Performers [X] Announcement Only	
[ ] Security	[ ] Daytime - Private [ ] Overnight - Private [ ] Event Time Frame - SPPD	
[X] Sanitary Facilities - Port-O-Lets	Regular Units 3 Disabled Units 1 Hand Washing 1	
[ ] Off-site Parking / Shuttle		
[ ] Semitruck / Tractor Trailer		

Marketing: Please check all that apply.

- [X] Invitations
- [X] Posters / Flyers
- [X] Newspaper / Internet
- [X] Radio
- [X] Television
- [ ] Remote Broadcast

City logo should be used in any promotional materials, posters, flyers, ads, website, public service announcements, and press releases.

Electrical Requirements:

Does your event require any power needs using more than the standard 110/20amp located in the parks? ☐ YES ☐ NO

If YES, check all that apply. ☐ RV'S ☐ Coffee Vendors ☐ Ice Bins ☐ Freezers ☐ Ice Cream Vendors ☐ Catering Trucks

☐ Other:

Please explain the details of the above items checked. Tell us how much and what type of power they would require.

Will you supply your own generators? ☐ YES ☒ NO

Will your event have a licensed electrician on-site during the event? ☐ YES ☐ NO If YES, who?

Will your event be requesting any variances from City policies or procedures? If YES, please explain.

If City permits, licenses, or services are required for event, who will pay for them?

Name: Tampa Bay Club Sport or TASCO Phone: 877-820-2582, ext 2

Address (including zip): 380 105th Terrace NE ST. Petersburg, FL 33716

Type of music, # of stages, and # of bands.

Showmobile with MC

List Vending Products. Name & Provider.

For Use of Beer/Wine - Please provide name, address and phone number of the sponsoring 501(c)3 or catering company.

Secrets of the Sea (most likely)
(727) 803-9799, Ext. 202 -or- info@thesecretsofthesea.org

Explain subject/purpose of all speeches/demonstrations which will occur.

Discuss your load in/load out parking needs, include times and dates.

up to TASCO

Other Comments: Please describe your fee structure.

Teams can sign up ahead of time at $450-550/team. Spectators are free.

Other comments:

Tampa Bay Club Sport plans to run an adult version of TASCO's mudwars using their existing setups. TBCS will do the marketing and registration of adult teams for the event. TASCO will provide the equipment and staff for the event. Plans are to partner with the Secrets of the Seas Aquarium again to provide beer/wine sales to the participants. The charity will have all the proper permits etc for alcohol sales.

I represent and warrant that the purpose of the proposed activity/event and conduct of the sponsor(s) and the participants shall conform to all requirements of law and all ordinances of the State of Florida, Pinellas County, and the City of St. Petersburg including, but not limited to, City noise ordinances and Parks and Recreation Department Policies and Procedures. I acknowledge that failure to observe such laws, ordinances, or policies and procedures will result in an immediate cancellation of the event and all permits.

WITHOUT LIMITING THE GENERALITY OF THE FOREGOING, I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE PARKS AND RECREATION DEPARTMENT POLICIES AND PROCEDURES PERTAINING TO THE USE OF PARKS AND THE PARK RULES SET FORTH IN ARTICLE II, CHAPTER 21, OF THE ST. PETERSBURG CITY CODE, INCLUDING BUT NOT LIMITED TO THE INDEMNIFICATION AND INSPECTION OBLIGATIONS ASSUMED BY ME AND THE PERSON OR ENTITY ON WHOSE BEHALF THIS APPLICATION IS BEING MADE.

I certify that the facts contained in this application are accurate.

Name: Tracey Giebner Title: President Date: 11/6/18

Appendix A

Co-sponsored event park fee structure.

1. Events in Vinoy Park will be assessed $300.00 per event day (e.g.,1 day event = $300.00, 2 days = $600.00, 3 days or more = $900.00.) This includes the $30.00 park permit fee.

2. Events in any other park will be assessed $200.00 per event day (e.g., 1 day event = $200.00, 2 days = $400.00, 3 or more days = $600.00). This includes the $30.00 park permit fee.

   The above fees will be due at the same time the $30.00 co-sponsored application fee is due. If you decide to cancel your event, all but $60.00 is refundable.

* Requests made after the co-sponsored process, must be submitted no fewer than six (6) months before planned event.

* Any event applying for the co-sponsorship inside the six (6) month time frame will be assessed a $1,200.00 administrative late fee.

The City requires payment in advance for all City services estimated and/or provided for first time events and one of a kind nonrecurring events.

Payment will be required at least ten (10) business days prior to the start of the event and shall be in the form of cash, certified check, or an irrevocable bank letter of credit.

All first time entities requesting events will be required to complete a credit application.

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www.stpete.org

Appendix B
President or CEO
Responsible Party Information

Please complete the information below for each responsible party.

Name of the **Nonprofit** Corporation: Tasco

Name of Responsible Party (President or CEO ONLY): Shawn Drouin

Title of Responsible Party:

Physical Address of Responsible Party:

Phone Number of Responsible Party:

Email Address of Responsible Party:

Nonprofit (Employee Identification Number):

Name of the **For-profit** Corporation: Active Endeavors, INC d/b/a Tampa Bay Club Sport

Name of Responsible Party (President or CEO ONLY): Tracey Giebner

Title of Responsible Party: President

Physical Address of Responsible Party: 10901 Roosevelt Blvd 100D, St. Pete, FL 33716

Phone Number of Responsible Party: 877-820-2582 x2

Email Address of Responsible Party: chris@tampabayclubsport.com

For-profit (Employee Identification Number) 26-0016418

Please include a copy of the the current IRS Nonprofit Affidavit / For Profit

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APPENDIX C
STATEMENT OF REVENUE AND EXPENSES FORM
PRIOR YEAR'S EVENT
(Must be completed)

Name of Event: Extreme Mud Wars
Date(s) of Event: Jul 13, 2019 - Jul 13, 2019

I. REVENUE SOURCES (attach sheet if more space is needed)

		Amount
1.	team fees	$26,469.00
2.	sponsors	$5,000.00
3.		
4		
5.		
6.		
7.		
8.		
	TOTAL GROSS REVENUE	$31,469.00

II. EXPENSES (attach sheet if more space is needed)

1.	City fees (fire/park/rec/police)	$18,729.00
2.		
3.		
4	Club Sport expense (staff/signage/shirts/trophies/cc fees/advertising)	$5,528.00
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
	TOTAL OPERATING EXPENSES	$24,257.00
	TOTAL NET INCOME	$7,212.00

III. ALLOCATION OF NET INCOME (attach sheet if more space is needed)

1.	Club Sport	$3,606.00
2.	TASCO donation	$3,606.00
3.		
4.		
5.		
6.		
	TOTAL ALLOCATION OF NET INCOME	$7,212.00

Prepared by: Ian Elston Date: Nov 6, 2018

Print Application

Submit Application by Email

Florida Department of State DIVISION OF CORPORATIONS

Department of State / Division of Corporations / Search Records / Detail By Document Number /

Detail by Entity Name

Florida Profit Corporation
ACTIVE ENDEAVORS, INC.

Filing Information

Document Number	P02000004011
FEI/EIN Number	26-0016418
Date Filed	01/11/2002
State	FL
Status	ACTIVE

Principal Address

380 105TH TERRACE NE
ST. PETERSBURG, FL 33716

Changed: 12/18/2017

Mailing Address

380 105TH TERRACE NE
ST. PETERSBURG, FL 33716

Changed: 12/18/2017

Registered Agent Name & Address

GIEBNER, CHRISTOPHER S
791 Suwannee Ct Ne
ST. PETERSBURG, FLORIDA, FL 33702

Address Changed: 01/12/2015

Officer/Director Detail

Name & Address

Title P

GIEBNER, TRACEY L
791 Suwannee Ct NE
ST. PETERSBURG, FL 33702

Title TS

GIEBNER, CHRISTOPHER S
791 Suwannee Ct NE
ST. PETERSBURG, FL 33702

Annual Reports

Report Year	Filed Date
2016	03/01/2016
2017	01/09/2017
2018	01/10/2018

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04/28/2008 -- ANNUAL REPORT	View image in PDF format
08/09/2007 -- ANNUAL REPORT	View image in PDF format
04/11/2006 -- ANNUAL REPORT	View image in PDF format
01/26/2005 -- ANNUAL REPORT	View image in PDF format
04/12/2004 -- ANNUAL REPORT	View image in PDF format
01/05/2003 -- ANNUAL REPORT	View image in PDF format
01/11/2002 -- Domestic Profit	View image in PDF format

st.petersburg

Contract/Permit

Contract #: 25479
Date: 14 Nov 2018

User: JSBENNIN
Status: Firm

TAMPA BAY CLUB SPORT
CHRIS GIEBNER
380 105TH TERR NE
ST PETERSBURG FL 33716 USA

Primary #: (877) 820-2582
Secondary #: (727) 420-6868
Other #: ()

Purpose of Use: EXTREME MUD WARS **Expected:** 500 **Co-Sponsored Event** **Contract Balance** $60.00

Conditions of Use: Insurance Required

Other Information:

Use of beer and wine	Yes
Use of fencing	Yes
Use of liquor	No

Date(s) and Time(s) of Use: **Starting: Sat 06 Jul 19 06:00 am** **Ending: Sun 14 Jul 19 09:00 pm**

Facility/Equipment	Day	Date	Time	Fee	Extra Fee	Tax	Total
Lake Vista Park	Sat	06 Jul 2019	06:00 AM	$0.00	$0.00	$0.00	$0.00
Park		07 Jul 2019	09:00 PM				
Lake Vista Park	Sat	13 Jul 2019	06:00 AM	$0.00	$0.00	$0.00	$0.00
Park		14 Jul 2019	09:00 PM				

Additional Fees:

Extra Fee	Quantity	Charge	Tax	Total
Application Processing Fee - Parks	1	$30.00	$0.00	$30.00
Co-Sponsored Application Fee	1	$30.00	$0.00	$30.00
				$60.00

Charges:

Fees	Extra Fees	Tax	Total	Deposit	Total Applied	Contract Balance	Account Balance
$ 0.00	$60.00	$0.00	$60.00	$0.00	$0.00	$60.00	$24,510.44

Balance of rental due and payable immediately.

Payments:

Additional Notes:

I have read this Agreement and agree to comply with the terms and conditions set forth in this Agreement. I also understand this Agreement is not final until approved and executed by the Parks and Recreation Superintendent or designee.

By:(Sign Name) _____

(Print Name) **CHRIS GIEBNER**

TAMPA BAY CLUB SPORT
Name of User Organization, If Applicable

CITY OF ST. PETERSBURG, FLORIDA

By:(Sign Name): _____
Parks and Recreation Superintendent

(Print Name) _____
Parks and Recreation Department

Supervisor II / Foreman	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:

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Florida Department of State

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Detail by Entity Name

Florida Not For Profit Corporation
PIER AQUARIUM, INC.

Filing Information

Document Number	N26771
FEI/EIN Number	59-2899571
Date Filed	06/03/1988
State	FL
Status	ACTIVE
Last Event	NAME CHANGE AMENDMENT
Event Date Filed	06/21/1988
Event Effective Date	NONE

Principal Address

244 Second Ave N
Suite 203
ST. PETERSBURG, FL 33701

Changed: 02/25/2015

Mailing Address

244 Second Ave N
Suite 203
ST. PETERSBURG, FL 33701

Changed: 01/20/2014

Registered Agent Name & Address

LUTHER, MARK, Phd
2180 GRAND BAYOU GRANDE BLVD. NE
ST PETERSBURG, FL 33704

Name Changed: 02/22/2016

Address Changed: 02/22/2016

Officer/Director Detail

Name & Address

Title D

JOHNSON, LARI

200 2ND AVE S STE 159
SAINT PETERSBURG, FL 33701

Title P

LUTHER, MARK PH.D
2180 BAYOU GRANDE NE
SAINT PETERSBURG, FL 33701

Title D

BETZER, PETER PH.D
1830 7TH ST N
SAINT PETERSBURG, FL 33704

Title VP

WALLACE, SUSAN H
343 BRIGHTWATERS BLVD NE.
ST. PETERSBURG, FL 33704

Annual Reports

Report Year	Filed Date
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04/03/2001 -- ANNUAL REPORT	View image in PDF format
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05/13/1997 -- ANNUAL REPORT	View image in PDF format

CITY OF ST. PETERSBURG
PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENT APPLICATION

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st. petersburg parks & recreation

Date Received: 10/24/18
Check or Cash:
Application #: 1
Packet: A
Permit #: 25381

Event Title: St. Petersburg AFSP Out of the Darkness Community Walk Phone No.: 407-415-8757 Fax No.: N/A

Entity Name: American Foundation for Suicide Prevention Federal I.D. Number: 13-3393329

Event Date(s): Saturday, October 19, 2019 Location: South Straub Park

Day 1 of Event: 10/19/2019 Time Gates Open: 6:00AM Ending Time: 1:00PM

Day 2 of Event: Time Gates Open: Ending Time:

Day 3 of Event: Time Gates Open: Ending Time:

Application Prepared by: Tara Larsen Phone: 407-415-8757

Title: Central and Southern Florida Area Director Cell Phone: 407-415-8757

Address: PO Box 533754 City: Orlando State: FL Zip: 32853

Email Address: tsullivan@afsp.org

Additional Contact Person: Thuy Huynh Day Phone: 727-403-2754

What month/year were you incorporated as nonprofit? November 1991

List all 501(c)3 entities that will benefit from this event. American Foundation for Suicide Prevention

Name of the for-profit entity?

Describe how this event will contribute to the quality of life in and enhance the image of St. Petersburg.

Funds raised from the walk will be used by AFSP both nationally and locally. AFSP is the leading non-profit organization dedicated to research, education, and advocacy for suicide prevention as well as support to those who have attempted suicide, as well as those who have lost someone to suicide.

The local chapters offers Applied Suicide Intervention Skills Training which teaches individuals how to complete an intervention at the time of suicidal crisis. AFSP Tampa Bay also sponsors safeTALK trainings which are educate those 15 years of age older how to become suicide alert and how to help during a crisis.

Describe what economic benefit and impact this event will bring to St. Petersburg.

People from around the country will attend the walk. In the past, we had people from as out of state and the surrounding Tampa Bay area counties who state at local hotels and visit many local restaurants. Many local business contribute prizes to the event, thus encourage the recipient to visit local establishments.

Each co-sponsored entity must possess liability insurance naming the City of St. Petersburg as an additional insured and secure said insurance in the amount determined by the City.

Does your group presently have liability insurance? ☒ YES ☐ NO How much? 1,000,000

Are there plans to sell or distribute beer/wine at your event? ☐ YES ☒ NO

Will there be an admission / registration fee? ☐ YES ☒ NO Advanced Fee: Day of:

Please provide the website address for your event. www.afsp.org/stpete

Please provide a phone number that can be advertised to the public. 407-415-8757

What is the estimated attendance for this event? Spectators 35 Participants 1165 Last Year's Total Attendance 1200

Please check the equipment and/or facilities you are requesting.

Recreation Equipment

Showmobile (Yes/No) YES

Bleacher(s) needed. Each bleacher approx. 180 people)

Tables (6 ft) # needed 40 Chairs # needed 80

Public Address System

# of portable risers needed (4 in. x 8 in. x 16 in. sections)

Special Events Facilities

- ☐ Mahaffey Theater
- ☐ Coliseum
- ☐ Sunken Gardens
- ☐ Boyd Hill

☐ Non-City Locations

Which Location?

South Straub Park

The following departments may provide and charge for additional services. You will be provided cost estimates in your Co-sponsored Agreement.

POLICE:	Public Safety Personnel, Marine Services
TRAFFIC:	Personnel, Equipment (cones, barricades, no parking signs)
FIRE:	Paramedics, Inspectors
PARKS SERVICES:	Cleanup Personnel, Dumpster(s), Trash Receptacles, Event Site Preparation and Restoration
RECREATION SERVICES:	On-site Presence, Logistics Help, Liaison with Other Ddepartments

Note: The City does not provide tents, Port-O-Lets, or large quantities of tables and chairs.

I certify that the event will be open to all citizens and that individuals will not be barred from participation due to race, creed, color, national origin, sex, age, or physical impairment. I understand that a financial report of the event is due in the Parks and Recreation office within 30 days of the completion of the event. I also understand that the City is to be shown as a co-sponsor on any promotional materials produced for the event. I agree to obtain the required liability insurance and to secure all necessary city/county/state permits/licenses. I further certify that the facts contained in this application are accurate.

Name:	Tara Larsen	Title:	Central and Southern Florida	Date:	10/24/18
Co-Sign:	Thuy Huygn	Title:	Walk Chair	Date:	10/24/18

NOTE:

a. **If person/entity preparing this application is not representing a nonprofit entity, the application must be co-signed by someone from a sponsoring nonprofit entity. A copy of the sponsoring entity's 501(c)3 designation must accompany this application.**

b. **If your entity has outstanding financial obligations with any department within the City of St. Petersburg, your application will not be processed until debt if paid.**

c. **Applications lacking information or the required completed appendixes listed below will not be processed.**

PLEASE ATTACH THE FOLLOWING

1. Route map for parade, run, walk, and/or bike event.
2. Site map of event and detail schedule of each day's events including open and close times.
3. Complete Appendix B and Appendix C.
4. Check for $30.00 for co-sponsored application processing (non-refundable).
5. Check for park permit fee. See Appendix A for fee structure.
6. A copy of 501(c)3 designation (if applicable)

FOR FURTHER INFORMATION, PLEASE CALL LYNN GORDON, PARKS & RECREATION MANAGER,
727-893-7766 or EMAIL: StPeteEvents@stpete.org

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www.stpete.org

PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENTS
SUMMARY SHEET

st. petersburg parks & recreation

Review and check all conditions which apply to this event: Note the corresponding obligation for each condition.

Condition		Obligation
☒ Public Invited		General Liability Insurance
☐ Located in Park		Park Permit
☐ Vending Product / Merchandise Sales		Occupational License
☐ Vending Food / Beverage		Health Inspection
☒ Vendors / Exhibitors	How many? 11 - 20 Vendors / Exhibitors	
☐ Vending Beer / Wine		Alcohol Permit Additional insurance Required
☐ Erecting Tents - Larger than 10ft x 12ft	How many?	Temporary Structure Permit
☐ Fence Installation	What type?	Temporary Structure Permit
☐ Other Structures	What structure?	Temporary Structure Permit
☐ Open Flame Food Preparation		Fire Inspection Permit
☐ Pyrotechnics		Fireworks Permit
☒ Require Street Closure		Parade or Street Closure Permit(s)
☐ VIP Area		
☒ Staging	☐ Professional ☒ Showmobile ☐ Other	
☐ Amplified Sound	☒ Performers ☐ Announcement Only	
☐ Security	☐ Daytime - Private ☐ Overnight - Private ☐ Event Time Frame - SPPD	
☒ Sanitary Facilities - Port-O-Lets	Regular Units 2 Disabled Units 1 Hand Washing 1	
☐ Off-site Parking / Shuttle		
☐ Semitruck / Tractor Trailer		

Marketing: Please check all that apply.

- ☒ Invitations
- ☒ Posters / Flyers
- ☐ Newspaper / Internet
- ☒ Radio
- ☒ Television
- ☐ Remote Broadcast

City logo should be used in any promotional materials, posters, flyers, ads, website, public service announcements, and press releases.

Electrical Requirements:

Does your event require any power needs using more than the standard 110/20amp located in the parks? ☐ YES ☒ NO

If YES, check all that apply. ☐ RV'S ☐ Coffee Vendors ☐ Ice Bins ☐ Freezers ☐ Ice Cream Vendors ☐ Catering Trucks ☐ Other:

Please explain the details of the above items checked. Tell us how much and what type of power they would require.

Will you supply your own generators? ☐ YES ☒ NO

Will your event have a licensed electrician on-site during the event? ☐ YES ☒ NO If YES, who?

Will your event be requesting any variances from City policies or procedures? If YES, please explain.

If City permits, licenses, or services are required for event, who will pay for them?

Name: American Foundation for Suicide Prevention Phone: 407-415-8757

Address (including zip): PO Box 533754, Orlando, FL 32853

Type of music, # of stages, and # of bands.

DJ will play family friendly pop music, we will have 1 stage

List Vending Products. Name & Provider.

Coda Sound - Stage and Sound
Tampa Tents - Tents

For Use of Beer/Wine - Please provide name, address and phone number of the sponsoring 501(c)3 or catering company.

N/A

Explain subject/purpose of all speeches/demonstrations which will occur.

Speeches will include topic of suicide and suicide prevention.

Discuss your load in/load out parking needs, include times and dates.

Tents, stage will load in the afternoon of Friday, October 18, 2019.
We will set up at 6:00 am the morning Saturday, October 19, 2019, we will load out of the park at Noon.

Other Comments: Please describe your fee structure.

There is no cost to attend the walk, it is open to the public. Individuals that raise $150 or more in donations will receive a free event t-shirt.

Other comments:

N/A

I represent and warrant that the purpose of the proposed activity/event and conduct of the sponsor(s) and the participants shall conform to all requirements of law and all ordinances of the State of Florida, Pinellas County, and the City of St. Petersburg including, but not limited to, City noise ordinances and Parks and Recreation Department Policies and Procedures. I acknowledge that failure to observe such laws, ordinances, or policies and procedures will result in an immediate cancellation of the event and all permits.

WITHOUT LIMITING THE GENERALITY OF THE FOREGOING, I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE PARKS AND RECREATION DEPARTMENT POLICIES AND PROCEDURES PERTAINING TO THE USE OF PARKS AND THE PARK RULES SET FORTH IN ARTICLE II, CHAPTER 21, OF THE ST. PETERSBURG CITY CODE, INCLUDING BUT NOT LIMITED TO THE INDEMNIFICATION AND INSPECTION OBLIGATIONS ASSUMED BY ME AND THE PERSON OR ENTITY ON WHOSE BEHALF THIS APPLICATION IS BEING MADE.

I certify that the facts contained in this application are accurate.

Name: Tara Sullivan Larsen Title: Central and Southern Florida A Date: 10/24/18

Appendix A

Co-Sponsored Event Park Fee Structure

* Events in Vinoy Park will be assessed $300.00 per event day (e.g.,1 day event = $300.00, 2 days = $600.00, 3 days or more = $900.00.) This includes the $30.00 park permit fee.

* Events in any other park will be assessed $200.00 per event day (e.g., 1 day event = $200.00, 2 days = $400.00, 3 or more days = $600.00). This includes the $30.00 park permit fee.

* The above fees will be due at the time you submit your application plus the $30.00 co-sponsored application fee.

* All co-sponsored event applications must be submitted at least 6 month prior to the event.

* Any application for a co-sponsored event submitted inside the six (6) month time frame will be assessed a non refundable $1,200.00 late fee.

* **The City requires payment in advance for all City services estimated and/or provided for first time events and one of a kind nonrecurring events.**

* **Payment will be required at least ten (10) business days prior to the start of the event and shall be in the form of cash, certified check, or an irrevocable bank letter of credit.**

* **All first time entities requesting events will be required to complete a credit application.**

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Appendix B
President or CEO
Responsible Party Information

Please complete the information below for each responsible party.

Name of the **Nonprofit** Corporation: American Foundation for Suicide Prevention

Name of Responsible Party (President or CEO ONLY): Robert Gebbia

Title of Responsible Party: CEO

Physical Address of Responsible Party: 120 Wall Street - 29th Floor, New York, NY 10005

Phone Number of Responsible Party: 212-363-3500

Email Address of Responsible Party: rgebbia@afsp.org

Nonprofit (Employee Identification Number): 13- 3393329

Name of the **For-profit** Corporation:

Name of Responsible Party (President or CEO ONLY):

Title of Responsible Party:

Physical Address of Responsible Party:

Phone Number of Responsible Party:

Email Address of Responsible Party:

For-profit (Employee Identification Number)

Please include a copy of the the current IRS Nonprofit Affidavit / For Profit

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APPENDIX C
STATEMENT OF REVENUE AND EXPENSES FORM
PRIOR YEAR'S EVENT
(Must be completed)

Name of Event: Out of the Darkness Walk
Date(s) of Event: Oct 18, 2019 - Oct 20, 2019

I. REVENUE SOURCES (attach sheet if more space is needed)

		Amount
1.	Individual Walkers	$65,000.00
2.	Sponsorships	$5,000.00
3.		
4		
5.		
6.		
7.		
8.		
	TOTAL GROSS REVENUE	$70,000.00

II. EXPENSES (attach sheet if more space is needed)

1.	Permit	$1,600.00
2.	Tents	$1,500.00
3.	Stage and Sound	$2,500.00
4	Advertising	$1,000.00
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
	TOTAL OPERATING EXPENSES	$6,600.00
	TOTAL NET INCOME	$63,400.00

III. ALLOCATION OF NET INCOME (attach sheet if more space is needed)

1.	Education	$35,000.00
2.	Research	$13,900.00
3.	Survivor Programs	$5,000.00
4.		
5.		
6.		
	TOTAL ALLOCATION OF NET INCOME	$53,900.00

Prepared by: Tara Sullivan Larsen Date: Oct 24, 2018

Print Application

Submit Application by Email

Florida Department of State

DIVISION OF CORPORATIONS

Detail by Entity Name

Foreign Not For Profit Corporation
AMERICAN FOUNDATION FOR SUICIDE PREVENTION, INC.

Filing Information

Document Number	F05000000628
FEI/EIN Number	13-3393329
Date Filed	02/03/2005
State	DE
Status	ACTIVE
Last Event	REINSTATEMENT
Event Date Filed	06/20/2012

Principal Address

120 Wall Street, FL 29
New York, NY 10005

Changed: 01/09/2017

Mailing Address

120 WALL ST., FL 29
New York, NY 10005

Changed: 01/09/2017

Registered Agent Name & Address

INCORP SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470

Name Changed: 06/20/2012

Address Changed: 06/20/2012

Officer/Director Detail

Name & Address

Title Secretary

Killpack, Daniel
120 Wall Street, FL 29
New York, NY 10005

Annual Reports

Report Year	Filed Date
2016	08/17/2016
2017	01/09/2017
2018	03/28/2018

Document Images

03/28/2018 -- ANNUAL REPORT	View image in PDF format
01/09/2017 -- ANNUAL REPORT	View image in PDF format
08/17/2016 -- ANNUAL REPORT	View image in PDF format
01/12/2015 -- ANNUAL REPORT	View image in PDF format
04/17/2014 -- ANNUAL REPORT	View image in PDF format
06/24/2013 -- ANNUAL REPORT	View image in PDF format
06/20/2012 -- REINSTATEMENT	View image in PDF format
04/30/2009 -- Reinstatement	View image in PDF format
02/03/2005 -- Foreign Non-Profit	View image in PDF format

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Contract/Permit

Contract #: 25381
Date: 06 Nov 2018

User: JSBENNIN
Status: Firm

AMERICAN FOUNDATION FOR SUICIDE PREVENT
TARA LARSEN
PO BOX 533754
ORLANDO FL 32853 USA

Primary #: (813) 352-9890
Secondary #: (727)
Other #: ()

Purpose of Use: OUT OF THE DARKNESS COMMUNITY WALK **Expected:** 1,200 **Co-Sponsored Event** **Contract Balance** $230.00

Conditions of Use: Insurance Required

Other Information:

Use of beer and wine	No
Use of fencing	No
Use of liquor	No

Date(s) and Time(s) of Use: **Starting: Fri 18 Oct 19 06:00 am** **Ending: Sat 19 Oct 19 09:00 pm**

Facility/Equipment	Day	Date	Time	Fee	Extra Fee	Tax	Total
South Straub Park	Fri	18 Oct 2019	06:00 AM	$0.00	$200.00	$0.00	$200.00
Park		19 Oct 2019	09:00 PM				

Additional Fees:

Extra Fee	Quantity	Charge	Tax	Total
Co-Sponsored Application Fee	1	$30.00	$0.00	$30.00
				$30.00

Extra Fee - Bookings	Hours	Quantity	Charge	Tax	Total
Co-Sponsored Permit Fee	39:00	1	$200.00	$0.00	$200.00
		1	$200.00	$0.00	$200.00

Charges:

Fees	Extra Fees	Tax	Total	Deposit	Total Applied	Contract Balance	Account Balance
$ 0.00	$230.00	$0.00	$230.00	$0.00	$0.00	$230.00	$230.00

Balance of rental due and payable immediately.

Payments:

Additional Notes:

I have read this Agreement and agree to comply with the terms and conditions set forth in this Agreement. I also understand this Agreement is not final until approved and executed by the Parks and Recreation Superintendent or designee.

By:(Sign Name) _____

(Print Name) **TARA LARSEN**

AMERICAN FOUNDATION FOR SUICIDE PREVENT
Name of User Organization, If Applicable

CITY OF ST. PETERSBURG, FLORIDA

By:(Sign Name): _____
Parks and Recreation Superintendent

(Print Name) _____
Parks and Recreation Department

Contract #: 25381
Date: 06 Nov 2018

User: JSBENNIN
Status: Firm

Supervisor II / Foreman	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:

The Americans with Disabilities Act (A.D.A.) guarantees equal opportunity for people with disabilities. Special accommodation requests such as sign language interpreters, taped or Braille materials, assistive listening devices, etc., should be made at least one week prior to the activity or program. Individuals using TTD devices, please contact us using the Florida Relay Service at 800-955-8771.

CITY OF ST. PETERSBURG
PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENT APPLICATION

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st. petersburg parks & recreation

Date Received: 11-14-18
Check or Cash:
Application #: 2
Packet: A
Permit #: 25480

Event Title: The Florida Orchestra Pops in the Park Phone No.: 727.362.5466 Fax No.:

Entity Name: The Florida Orchestra Federal I.D. Number: 591223691

Event Date(s): 10.19.19 Location: Vinoy Park

Day 1 of Event: 10.19.19 Time Gates Open: 3:00pm Ending Time: 9:30pm

Day 2 of Event: Time Gates Open: Ending Time:

Day 3 of Event: Time Gates Open: Ending Time:

Application Prepared by: Cori Lint Phone: 727.362.5466

Title: Operations Manager Cell Phone: 330.780.7668

Address: 244 2nd Ave. N. Suite 420 City: St. Petersburg State: FL Zip: 33701

Email Address: clint@floridaorchestra.org

Additional Contact Person: Edward Parsons Day Phone: 727.362.5470

What month/year were you incorporated as nonprofit? 1967

List all 501(c)3 entities that will benefit from this event. Tampa Bay Harvest, Saturday Morning Market, Arts Conservatory for Teens (TBD)

Name of the for-profit entity? none

Describe your event with details.

TFO's Pops in the Park is a one-of-a-kind annual event that brings live symphonic music to the public for free in an outdoor concert.

Describe what economic benefit and impact this event will bring to St. Petersburg.

This cultural event unites the people and businesses of St. Petersburg, and helps St. Pete be a vibrant and attractive place to visit and live.

Each co-sponsored entity must possess liability insurance naming the City of St. Petersburg as an additional insured and secure said insurance in the amount determined by the City.

Does your group presently have liability insurance? ☒ YES ☐ NO How much? $1 million

Are there plans to sell or distribute beer/wine at your event? ☐ YES ☒ NO

Will there be an admission / registration fee? ☐ YES ☒ NO Advanced Fee: Day of:

Please provide the website address for your event. floridaorchestra.org

Please provide a phone number that can be advertised to the public. 727.892.3337

What is the estimated attendance for this event? Spectators 14000 Participants 150 Last Year's Total Attendance 14000

Please check the equipment and/or facilities you are requesting.

Recreation Equipment

Showmobile (Yes/No) No

Bleacher(s) needed. Each bleacher approx. 180 people)

Tables (6 ft) # needed Chairs # needed

Public Address System

# of portable risers needed (4 in. x 8 in. x 16 in. sections)

Special Events Facilities

- ☐ Mahaffey Theater
- ☐ Coliseum
- ☐ Sunken Gardens
- ☐ Boyd Hill

☐ Non-City Locations

Which Location?

The following departments may provide and charge for additional services. You will be provided cost estimates in your Co-sponsored Agreement.

POLICE:	Public Safety Personnel, Marine Services
TRAFFIC:	Personnel, Equipment (cones, barricades, no parking signs)
FIRE:	Paramedics, Inspectors
PARKS SERVICES:	Cleanup Personnel, Dumpster(s), Trash Receptacles, Event Site Preparation and Restoration
RECREATION SERVICES:	On-site Presence, Logistics Help, Liaison with Other Ddepartments

Note: The City does not provide tents, Port-O-Lets, or large quantities of tables and chairs.

I certify that the event will be open to all citizens and that individuals will not be barred from participation due to race, creed, color, national origin, sex, age, or physical impairment. I understand that a financial report of the event is due in the Parks and Recreation office within 30 days of the completion of the event. I also understand that the City is to be shown as a co-sponsor on any promotional materials produced for the event. I agree to obtain the required liability insurance and to secure all necessary city/county/state permits/licenses. I further certify that the facts contained in this application are accurate.

Name:	Cori Lint	Title:	Operations Manager	Date:	11.12.18
Co-Sign:		Title:	GM	Date:	11/13/18

NOTE:

a. **If person/entity preparing this application is not representing a nonprofit entity, the application must be co-signed by someone from a sponsoring nonprofit entity. A copy of the sponsoring entity's 501(c)3 designation must accompany this application.**

b. **If your entity has outstanding financial obligations with any department within the City of St. Petersburg, your application will not be processed until debt if paid.**

c. **Applications lacking information or the required completed appendixes listed below will not be processed.**

PLEASE ATTACH THE FOLLOWING

1. Route map for parade, run, walk, and/or bike event.
2. Site map of event and detail schedule of each day's events including open and close times.
3. Complete Appendix B and Appendix C.
4. Check for $30.00 for co-sponsored application processing (non-refundable).
5. Check for park permit fee. See Appendix A for fee structure.
6. A copy of 501(c)3 designation (if applicable)

FOR FURTHER INFORMATION, PLEASE CALL LYNN GORDON, PARKS & RECREATION MANAGER, 727-893-7766 or EMAIL: StPeteEvents@stpete.org

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www.stpete.org

PARKS & RECREATION DEPARTMENT
CO-SPONSORED EVENTS
SUMMARY SHEET

st. petersburg parks & recreation

Review and check all conditions which apply to this event: Note the corresponding obligation for each condition.

Condition		Obligation
[X] Public Invited		General Liability Insurance
[X] Located in Park		Park Permit
[ ] Vending Product / Merchandise Sales		Occupational License
[X] Vending Food / Beverage		Health Inspection
[X] Vendors / Exhibitors	How many? 21 - 30 Vendors / Exhibitors	
[ ] Vending Beer / Wine		Alcohol Permit Additional insurance Required
[ ] Erecting Tents - Larger than 10ft x 12ft	How many?	Temporary Structure Permit
[X] Fence Installation	What type? bike racks only	Temporary Structure Permit
[X] Other Structures	What structure? large stage w/ roof	Temporary Structure Permit
[ ] Open Flame Food Preparation		Fire Inspection Permit
[X] Pyrotechnics		Fireworks Permit
[X] Require Street Closure		Parade or Street Closure Permit(s)
[X] VIP Area		
[X] Staging	[X] Professional [ ] Showmobile [ ] Other	
[X] Amplified Sound	[X] Performers [ ] Announcement Only	
[X] Security	[X] Daytime - Private [ ] Overnight - Private [X] Event Time Frame - SPPD	
[X] Sanitary Facilities - Port-O-Lets	Regular Units 26 Disabled Units 4 Hand Washing 5	
[X] Off-site Parking / Shuttle		
[ ] Semitruck / Tractor Trailer		

Marketing: Please check all that apply.

- [ ] Invitations
- [X] Posters / Flyers
- [X] Newspaper / Internet
- [X] Radio
- [X] Television
- [ ] Remote Broadcast

City logo should be used in any promotional materials, posters, flyers, ads, website, public service announcements, and press releases.

Electrical Requirements:

Does your event require any power needs using more than the standard 110/20amp located in the parks? ☒ YES ☐ NO

If YES, check all that apply. ☐ RV'S ☐ Coffee Vendors ☐ Ice Bins ☐ Freezers ☐ Ice Cream Vendors ☐ Catering Trucks ☐ Other:

Please explain the details of the above items checked. Tell us how much and what type of power they would require.

Power 100 amp single phase w/ camlocks

Will you supply your own generators? ☐ YES ☒ NO

Will your event have a licensed electrician on-site during the event? ☒ YES ☐ NO If YES, who? Union crew/city provides

Will your event be requesting any variances from City policies or procedures? If YES, please explain.

No

If City permits, licenses, or services are required for event, who will pay for them?

Name: The Florida Orchestra Phone: 727.362.5466

Address (including zip): 244 2nd Ave. N. Suite 420, St. Petersburg, FL 33701

Type of music, # of stages, and # of bands.

Classical orchestra with 3-4 opening local groups

List Vending Products. Name & Provider.

A variety of food and non-alcoholic beverage providers arranged through partnership with Saturday Morning Market and Gulf to Bay Food Truck association

For Use of Beer/Wine - Please provide name, address and phone number of the sponsoring 501(c)3 or catering company.

Explain subject/purpose of all speeches/demonstrations which will occur.

Thanking sponsors, introducing orchestra and other performers

Discuss your load in/load out parking needs, include times and dates.

Load in for stage beginning 10.17.18. TFO Truck and ESI truck load in on 10.19.17 in the morning. Vendors load in 10.19.17 until street closures.

Other Comments: Please describe your fee structure.

Free concert, no tickets, open seating.

Other comments:

I represent and warrant that the purpose of the proposed activity/event and conduct of the sponsor(s) and the participants shall conform to all requirements of law and all ordinances of the State of Florida, Pinellas County, and the City of St. Petersburg including, but not limited to, City noise ordinances and Parks and Recreation Department Policies and Procedures. I acknowledge that failure to observe such laws, ordinances, or policies and procedures will result in an immediate cancellation of the event and all permits.

WITHOUT LIMITING THE GENERALITY OF THE FOREGOING, I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE PARKS AND RECREATION DEPARTMENT POLICIES AND PROCEDURES PERTAINING TO THE USE OF PARKS AND THE PARK RULES SET FORTH IN ARTICLE II, CHAPTER 21, OF THE ST. PETERSBURG CITY CODE, INCLUDING BUT NOT LIMITED TO THE INDEMNIFICATION AND INSPECTION OBLIGATIONS ASSUMED BY ME AND THE PERSON OR ENTITY ON WHOSE BEHALF THIS APPLICATION IS BEING MADE.

I certify that the facts contained in this application are accurate.

Name: Cori Lint Title: Operations Manager Date: 11.12.18

Appendix A

Co-Sponsored Event Park Fee Structure

* Events in Vinoy Park will be assessed $300.00 per event day (e.g.,1 day event = $300.00, 2 days = $600.00, 3 days or more = $900.00.) This includes the $30.00 park permit fee.

* Events in any other park will be assessed $200.00 per event day (e.g., 1 day event = $200.00, 2 days = $400.00, 3 or more days = $600.00). This includes the $30.00 park permit fee.

* The above fees will be due at the time you submit your application plus the $30.00 co-sponsored application fee.

* All co-sponsored event applications must be submitted at least 6 month prior to the event.

* Any application for a co-sponsored event submitted inside the six (6) month time frame will be assessed a non refundable $1,200.00 late fee.

* **The City requires payment in advance for all City services estimated and/or provided for first time events and one of a kind nonrecurring events.**

* **Payment will be required at least ten (10) business days prior to the start of the event and shall be in the form of cash, certified check, or an irrevocable bank letter of credit.**

* **All first time entities requesting events will be required to complete a credit application.**

Appendix B
President or CEO
Responsible Party Information

Please complete the information below for each responsible party.

Name of the **Nonprofit** Corporation: The Florida Orchestra

Name of Responsible Party (President or CEO ONLY): Sherry Powell

Title of Responsible Party: Interim President

Physical Address of Responsible Party: 244 2nd Ave. N. Suite 420, St. Petersburg, FL 33701

Phone Number of Responsible Party: 727.362.5440

Email Address of Responsible Party: spowell@floridaorchestra.org

Nonprofit (Employee Identification Number): 59-1223691

Name of the **For-profit** Corporation:

Name of Responsible Party (President or CEO ONLY):

Title of Responsible Party:

Physical Address of Responsible Party:

Phone Number of Responsible Party:

Email Address of Responsible Party:

For-profit (Employee Identification Number)

Please include a copy of the the current IRS Nonprofit Affidavit / For Profit

What method of invoicing would your organization prefer?

☐ BY Mail

Contact Name

Address

City, State, Zip

☒ BY EMAIL

Email Address: clint@floridaorchestra.org

APPENDIX C
STATEMENT OF REVENUE AND EXPENSES FORM
PRIOR YEAR'S EVENT
(Must be completed)

Name of Event: The Florida Orchestra Pops in the Park

Date(s) of Event: 10.19.18 -

I. REVENUE SOURCES (attach sheet if more space is needed) **Amount**

1. See attached project income statement
2.
3.
4
5.
6.
7.
8.

TOTAL GROSS REVENUE

II. EXPENSES (attach sheet if more space is needed)

1.
2.
3.
4
5.
6.
7.
8.
9.
10.
11.
12.

TOTAL OPERATING EXPENSES

TOTAL NET INCOME

III. ALLOCATION OF NET INCOME (attach sheet if more space is needed)

1.
2.
3.
4.
5.
6.

TOTAL ALLOCATION OF NET INCOME

Prepared by: Cori Lint Date: 11.12.18

Print Application

Submit Application by Email

Please check the equipment and/or facilities you are requesting.

Recreation Equipment

Showmobile (Yes/No) No

Bleacher(s) needed. Each bleacher approx. 180 people)

Tables (6 ft) # needed Chairs # needed

Public Address System

# of portable risers needed (4 in. x 8 in. x 16 in. sections)

Special Events Facilities

- ☐ Mahaffey Theater
- ☐ Coliseum
- ☐ Sunken Gardens
- ☐ Boyd Hill

☐ Non-City Locations

Which Location?

The following departments may provide and charge for additional services. You will be provided cost estimates in your Co-sponsored Agreement.

POLICE:	Public Safety Personnel, Marine Services
TRAFFIC:	Personnel, Equipment (cones, barricades, no parking signs)
FIRE:	Paramedics, Inspectors
PARKS SERVICES:	Cleanup Personnel, Dumpster(s), Trash Receptacles, Event Site Preparation and Restoration
RECREATION SERVICES:	On-site Presence, Logistics Help, Liaison with Other Ddepartments

Note: The City does not provide tents, Port-O-Lets, or large quantities of tables and chairs.

I certify that the event will be open to all citizens and that individuals will not be barred from participation due to race, creed, color, national origin, sex, age, or physical impairment. I understand that a financial report of the event is due in the Parks and Recreation office within 30 days of the completion of the event. I also understand that the City is to be shown as a co-sponsor on any promotional materials produced for the event. I agree to obtain the required liability insurance and to secure all necessary city/county/state permits/licenses. I further certify that the facts contained in this application are accurate.

Name:	Cori Lint	Title:	Operations Manager	Date:	11.12.18
Co-Sign:		Title:	GM	Date:	11/13/18

NOTE: a. **If person/entity preparing this application is not representing a nonprofit entity, the application must be co-signed by someone from a sponsoring nonprofit entity. A copy of the sponsoring entity's 501(c)3 designation must accompany this application.**

b. **If your entity has outstanding financial obligations with any department within the City of St. Petersburg, your application will not be processed until debt if paid.**

c. **Applications lacking information or the required completed appendixes listed below will not be processed.**

PLEASE ATTACH THE FOLLOWING

1. Route map for parade, run, walk, and/or bike event.
2. Site map of event and detail schedule of each day's events including open and close times.
3. Complete Appendix B and Appendix C.
4. Check for $30.00 for co-sponsored application processing (non-refundable).
5. Check for park permit fee. See Appendix A for fee structure.
6. A copy of 501(c)3 designation (if applicable)

FOR FURTHER INFORMATION, PLEASE CALL LYNN GORDON, PARKS & RECREATION MANAGER, 727-893-7766 or EMAIL: StPeteEvents@stpete.org

Florida Department of State DIVISION OF CORPORATIONS

Department of State / Division of Corporations / Search Records / Detail By Document Number /

Detail by Entity Name

Florida Not For Profit Corporation
THE FLORIDA ORCHESTRA, INC.

Filing Information

Document Number	713571
FEI/EIN Number	59-1223691
Date Filed	11/02/1967
State	FL
Status	ACTIVE
Last Event	AMENDMENT
Event Date Filed	06/12/2017
Event Effective Date	NONE

Principal Address

244 2ND AVENUE N
SUITE 420
ST PETERSURG, FL 33701

Changed: 04/13/2009

Mailing Address

244 2ND AVENUE N
SUITE 420
ST PETERSURG, FL 33701

Changed: 04/13/2009

Registered Agent Name & Address

GARCIA, MIGUEL ANGEL, CFO
244 2ND AVE N
SUITE 420
ST PETERSURG, FL 33701

Name Changed: 01/12/2017

Address Changed: 04/13/2009

Officer/Director Detail

Name & Address

Title C

PAROO, JANET

180 BEACH DRIVE NE
UNIT 1501
SAINT PETERSBURG, FL 33701

Title PCEO

PASTREICH, MICHAEL
244 2ND AVE N
SAINT PETERSBURG, FL 33701

Title Secretary

SALAMONE, RON
1 BEACH DRIVE SE
#2603
ST PETERSBURG, FL 33701

Title CFO

GARCIA, MIGUEL ANGEL, CFO
6219 GREENWICH DRIVE
TAMPA, FL 33647

Title Treasurer

NURSE, KARL
176 21st AVENUESE
ST. PETERSBURG, FL 33705

Title VC

GREG, YADLEY
2907 RUBIDEAUX STREET
TAMPA, FL 33629

Annual Reports

Report Year	Filed Date
2017	01/12/2017
2018	04/02/2018
2018	08/01/2018

Document Images

08/01/2018 -- AMENDED ANNUAL REPORT	View image in PDF format
04/02/2018 -- ANNUAL REPORT	View image in PDF format
10/31/2017 -- AMENDED ANNUAL REPORT	View image in PDF format
06/12/2017 -- Amendment	View image in PDF format
01/12/2017 -- ANNUAL REPORT	View image in PDF format
05/17/2016 -- AMENDED ANNUAL REPORT	View image in PDF format
03/10/2016 -- ANNUAL REPORT	View image in PDF format
06/04/2015 -- AMENDED ANNUAL REPORT	View image in PDF format
01/30/2015 -- ANNUAL REPORT	View image in PDF format

st.petersburg

Contract/Permit

Contract #: 25480
Date: 14 Nov 2018

User: JSBENNIN
Status: Firm

FLORIDA ORCHESTRA
CORI LINT
244 2ND AVE N STE 420
ST PETERSBURG FL 33701 USA

Primary #: (727) 362-5466
Secondary #: (727)
Other #: ()

Purpose of Use: THE FLORIDA ORCHESTRA POPS IN THE PARK

Expected: 14,000

Co-Sponsored Event

Contract Balance $330.00

Conditions of Use: Insurance Required

Other Information:

Use of beer and wine	No
Use of fencing	No
Use of liquor	No

Date(s) and Time(s) of Use: **Starting: Thu 17 Oct 19 06:00 am** **Ending: Mon 21 Oct 19 11:00 pm**

Facility/Equipment	Day	Date	Time	Fee	Extra Fee	Tax	Total
Vinoy Park	Thu	17 Oct 2019	06:00 AM	$0.00	$300.00	$0.00	$300.00
Vinoy Park		21 Oct 2019	11:00 PM				

Additional Fees:

Extra Fee	Quantity	Charge	Tax	Total
Co-Sponsored Application Fee	1	$30.00	$0.00	$30.00
				$30.00

Extra Fee - Bookings	Hours	Quantity	Charge	Tax	Total
Co-Sponsored Permit Fee (Vinoy)	113:00	1	$300.00	$0.00	$300.00
		1	$300.00	$0.00	$300.00

Charges:

Fees	Extra Fees	Tax	Total	Deposit	Total Applied	Contract Balance	Account Balance
$ 0.00	$330.00	$0.00	$330.00	$0.00	$0.00	$330.00	$330.00

Balance of rental due and payable immediately.

Payments:

Additional Notes:

I have read this Agreement and agree to comply with the terms and conditions set forth in this Agreement. I also understand this Agreement is not final until approved and executed by the Parks and Recreation Superintendent or designee.

By:(Sign Name) _____

(Print Name) **CORI LINT**

FLORIDA ORCHESTRA
Name of User Organization, If Applicable

CITY OF ST. PETERSBURG, FLORIDA

By:(Sign Name): _____
Parks and Recreation Superintendent

(Print Name) _____
Parks and Recreation Department

Supervisor II / Foreman	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:
Manager	☐ Approved or	☐ Rejected	Date:

The Americans with Disabilities Act (A.D.A.) guarantees equal opportunity for people with disabilities. Special accommodation requests such as sign language interpreters, taped or Braille materials, assistive listening devices, etc., should be made at least one week prior to the activity or program. Individuals using TTD devices, please contact us using the Florida Relay Service at 800-955-8771.