

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90110 017 ***150.00

PROFIT CORPORATION
 ANNUAL REPORT
 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **435615**

1. Corporation Name
ST. ANDREWS MANAGEMENT COMPANY, INC.



Principal Place of Business
**4475 N. OCEAN BOULEVARD
 DELRAY BEACH FL 33483-7501**

Mailing Address
**4475 N. OCEAN BOULEVARD
 DELRAY BEACH FL 33483-7501**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		11/21/1973	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-1482988	
City & State		City & State		5. Certificate of Status Desired	
23		28		<input type="checkbox"/> \$8.75 Additional Fee Required	
Zip		Zip		6. Election Campaign Financing Trust Fund Contribution	
Country		Country		<input type="checkbox"/> \$5.00 May Be Added to Fees	
24		29		8. This corporation owes the current year Intangible Personal Property Tax.	
		30		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
JOH, ERIK E. 4600 N. OCEAN BLVD. BOYNTON BEACH FL 33435				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				85 Zip Code			
				FL			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
<input type="checkbox"/> DELETE	P BONGARD, GORDON	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
	4475 N. OCEAN BLVD	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	DELRAY BEACH FL 33483		
<input type="checkbox"/> DELETE	VRE STEELE, PAUL J.	2.1 TITLE	2.2 NAME
	4475 N. OCEAN BLVD.	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
	DELRAY BEACH FL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE	D DALTON, PETER	3.1 TITLE	3.2 NAME
	4475 N. OCEAN BLVD	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
	DELRAY BEACH FL 33483	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input checked="" type="checkbox"/> DELETE	V SUTTON, JOHN	4.1 TITLE	4.2 NAME
	4475 N OCEAN BLVD	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
	DELRAY BEACH FL 33483	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	VP Thurber, Peter P. 4475 N. Ocean Blvd. Delray Bch., FL 33483
<input type="checkbox"/> DELETE	ST ENTERLINE, NANCY	5.1 TITLE	5.2 NAME
	4475 N OCEAN BLVD	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
	DELRAY BEACH FL 33483	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
<input checked="" type="checkbox"/> DELETE	D KERESSEY, RICHARD	6.1 TITLE	6.2 NAME
	4475 N OCEAN BLVD	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP
	DELRAY BEACH FL 33483	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	D Bee, John M. 4475 N. Ocean Blvd. Delray Bch., FL 33483

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

[Signatures] 4/26/99 561-266-5700

CR2E034 (11/98)