

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 435615

FILED
Apr 14, 2005
Secretary of State

Entity Name: ST. ANDREWS MANAGEMENT COMPANY, INC.

Current Principal Place of Business:

4475 N. OCEAN BOULEVARD
DELRAY BEACH, FL 334837501

New Principal Place of Business:

Current Mailing Address:

4475 N. OCEAN BOULEVARD
DELRAY BEACH, FL 334837501

New Mailing Address:

FEI Number: 59-1482988 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROD TENNYSON, P.A.
1450 CENTREPARK BLVD., STE 100
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: BONE, BRUCE
Address: 4475 N. OCEAN BLVD
City-St-Zip: DELRAY BEACH, FL 33483

Title: PD () Delete
Name: CHANDLER, FRED
Address: 4475 N. OCEAN BLVD
City-St-Zip: DELRAY BEACH, FL 33483

Title: SD () Delete
Name: BONGARD, GORDON RP
Address: 4475 N OCEAN BLVD
City-St-Zip: DELRAY BEACH, FL 33483

Title: V () Delete
Name: RICHARD, FRANCIS
Address: 4475 N OCEAN BLVD
City-St-Zip: DELRAY BEACH, FL 33483

Title: T () Delete
Name: OWEN, PATRICIA
Address: 4475 N OCEAN BLVD
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: MARTIN, PETER
Address: 4475 N OCEAN BLVD
City-St-Zip: DELRAY BEACH, FL 33483

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

SIGNATURE: FRANCIS RICHARD

V

04/14/2005

Electronic Signature of Signing Officer or Director

_____ Date