

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06355

FILED  
Jan 05, 2012  
Secretary of State

**Entity Name:** ST. AUGUSTINE SOCIETY, INC.

**Current Principal Place of Business:**

70 WASHINGTON ST.  
ST. AUGUSTINE, FL 32084

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 1775  
ST AUGUSTINE, FL 32085

**New Mailing Address:**

FEI Number: 59-2475614

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BENOIT, JON  
66 ALMERIA  
ST. AUGUSTINE, FL 32084 US

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

BENOIT, JON  
21-D CASANOVA RD  
ST. AUGUSTINE, FL 32084 US

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

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

01/05/2012

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BENOIT, JON  
Address: 21-D CASANOVA RD  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: VP  
Name: VANDE BERG, JAMES  
Address: 1052 OXFORD DR  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: T  
Name: KIRKER, LYNDA  
Address: 70 WASHINGTON STREET  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: S  
Name: LEVETO, VIRGINIA  
Address: 39 ANASTASIA BLVD  
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: ED  
Name: MORRIS, RENEE'  
Address: 825 ALHAMBRA AVENUE  
City-St-Zip: ST AUGUSTINE, FL 32086

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RENEE' MORRIS

E.D.

01/05/2012

Electronic Signature of Signing Officer or Director

Date