

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Apr 27, 2009  
Secretary of State

DOCUMENT# N95000002180

Entity Name: ST. ANDREW'S FOUNDATION, INC.

**Current Principal Place of Business:**

210 S. INDIAN RIVER DRIVE  
FORT PIERCE, FL 34950 US

**New Principal Place of Business:**

**Current Mailing Address:**

210 S. INDIAN RIVER DRIVE  
FORT PIERCE, FL 34950 US

**New Mailing Address:**

FEI Number: 65-0845155

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LIEBLER, JOHN S  
210 S. INDIAN RIVER DRIVE  
FORT PIERCE, FL 34950 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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: ARMSTRONG, JR., CHARLES M  
Address: 3430 SW ISLESWORTH CIRCLE  
City-St-Zip: PALM CITY, FL 34990

Title: D ( ) Delete  
Name: HARDIE, LAURANCE  
Address: 18801 OKEECHOBEE ROAD  
City-St-Zip: FORT PIERCE, FL 34945

Title: O ( ) Delete  
Name: HANSEN, DAVID  
Address: 805 SOUTH 12TH STREET  
City-St-Zip: FORT PIERCE, FL 34950

Title: D ( ) Delete  
Name: LIEBLER, JOHN S  
Address: 2254 6TH AVENUE, SE  
City-St-Zip: VERO BEACH, FL 32962

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: O (X) Change ( ) Addition  
Name: ARMSTRONG, JR., CHARLES M  
Address: 3430 SW ISLESWORTH CIRCLE  
City-St-Zip: PALM CITY, FL 34990

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

Title: D (X) Change ( ) Addition  
Name: MOORE, RONALD J  
Address: 4803 PINETREE DRIVE  
City-St-Zip: FORT PIERCE, FL 34982

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN S. LIEBLER

D

04/27/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date