

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22864

FILED
Apr 04, 2008
Secretary of State

Entity Name: ST. AUGUSTINE ARCHAEOLOGICAL ASSOCIATION, INC.

Current Principal Place of Business:

24 CATHEDRAL PLACE
ST. AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

P O BOX 1301
ST. AUGUSTINE, FL 32085

New Mailing Address:

FEI Number: 59-2533136

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANGDON, JACK
24 CATHEDRAL PLACE
SUITE 312
ST. AUGUSTINE, FL 32084 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: PD () Delete
Name: MCAULIFFE, NICK
Address: 115 FERDINAND AVE.
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: SD () Delete
Name: STEPHENS, BOB
Address: 1093 AIA BEACH BLVD #178
City-St-Zip: ST AUGUSTINE, FL 32080

Title: D () Delete
Name: HART, GAIL
Address: 106 MYRTLEWOOD POINT RD.
City-St-Zip: EAST PALATKA, FL 32131

Title: VD () Delete
Name: GATLIN, JULIA
Address: 4000A MOULTRIE FORESIDE BLVD
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: D () Delete
Name: WALLACE, TONI
Address: 104 LINCOLN ST.
City-St-Zip: SST., AUGUSTINE, FL 32084

Title: D () Delete
Name: ROLLAND, VICKI
Address: 1805 TWELVE OAKS LANE
City-St-Zip: NEPTUNE BEACH, FL 32266

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: GEISER, PAUL
Address: 9146 JUNE LANE
City-St-Zip: ST. AUGUSTINE, FL 32080 US

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

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

Title: D (X) Change () Addition
Name: CHANDLER, LINDA
Address: 497 FEDERAL POINT RD.
City-St-Zip: EAST PALATKA, FL 32131

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: PAUL GEISER

TREA

04/04/2008

Electronic Signature of Signing Officer or Director

_____ Date