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: REV. RICHARD H. GOMER

I

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# 705239

Entity Name: ST ALBANS INC OF AUBURNDALE FLORIDA

Current Principal Place of Business:

202 PONTOTOC ST AUBURNDALE, FL 33823

Current Mailing Address:

PO BOX 1125 AUBURNDALE, FL 33823 US

FEI Number: 59-1891538

Name and Address of Current Registered Agent:

GOMER, RICHARD H. REV. 208 EAST LAKE AVE AUBURNDALE, FL 33823 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	REV. RICHARD H. GOMER			03/08/2022	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	PRESIDENT/RECTOR	Title	TREASURER		
Name	GOMER, RICHARD H. REV.	Name	PAGE, JEANNI		
Address	PO BOX 1125	Address	PO BOX 1125		
City-State-Zip:	AUBURNDALE FL 33823	City-State-Zip:	AUBURNDALE FL 33823		
Title	SR. WARDEN	Title	OFFICER		
Name	MANNING, LIZ	Name	GARDNER, CHRISTY		
Address	PO BOX 1125	Address	PO BOX 1125		
City-State-Zip:	AUBURNDALE FL 33823	City-State-Zip:	AUBURNDALE FL 33823		
Title	OFFICER	Title	OFFICER		
Name	GLYNN, SHARON	Name	GLYNN, SID		
Address	PO BOX 1125	Address	PO BOX 1125		
City-State-Zip:	AUBURNDALE FL 33823	City-State-Zip:	AUBURNDALE FL 33823		

Certificate of Status Desired: Yes

03/08/2022

PRESIDENT/RECTOR

FILED Mar 08, 2022 Secretary of State 3497504019CC

Date