

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06355

Entity Name: ST. AUGUSTINE SOCIETY, INC.

Current Principal Place of Business:

70 WASHINGTON ST.
ST. AUGUSTINE, FL 32084

Current Mailing Address:

P.O.BOX 1775
ST AUGUSTINE, FL 32085

FEI Number: 59-2475614

Certificate of Status Desired: No

Name and Address of Current 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

_____ Date

Officer/Director Detail :

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

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

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

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

Title ED
Name MORRIS, RENEE'
Address 825 ALHAMBRA AVENUE
City-State-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

EXECUTIVE DIRECTOR

01/30/2013

Electronic Signature of Signing Officer/Director Detail

Date