

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000002180

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

Current Principal Place of Business:

210 S. INDIAN RIVER DRIVE
FORT PIERCE, FL 34950

Current Mailing Address:

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

FEI Number: 65-0845155

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LIEBLER, JOHN S
210 S. INDIAN RIVER DRIVE
FORT PIERCE, FL 34950 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 O
Name GRAHAM, ROBERT A
Address 1358 SE SAN SOUCI LANE
City-State-Zip: PORT ST. LUCIE FL 34952

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

Title S
Name LINDGREN, SHARON L
Address 1997 SE CROWBERRY DRIVE
City-State-Zip: PORT ST. LUCIE FL 34983

Title D
Name ARMSTRONG, CHARLES M
Address 3430 SW ISLESWORTH CR
City-State-Zip: FT. PIERCE FL 34990-3168

Title D
Name CARVER, JEFFREY
Address 327 NW STRATFORD LANE
City-State-Zip: PORT ST. LUCIE FL 34983-3431

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: SHARON LINDGREN

PARISH ADMINISTRATOR 03/19/2013

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date