

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705239

FILED
Feb 03, 2009
Secretary of State

Entity Name: ST ALBANS INC OF AUBURNDALE FLORIDA

Current Principal Place of Business:

202 PONTOTOC PLAZA
AUBURNDALE, FL 33823 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1125
AUBURNDALE, FL 33823 US

New Mailing Address:

FEI Number: 59-1891538

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

O'NEAL, HARRY
828 ARIETTA CIR
AUBURNDALE, FL 33823 US

Name and Address of New Registered Agent:

THOMPSON, BILL
1592 AUBURN OAKS COURT
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: BILL THOMPSON

02/03/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COOKE, RUTH
Address: 9035 SARAH DRIVE
City-St-Zip: POLK CITY, FL 33868 US

Title: T () Delete
Name: MANN, JOAN F
Address: 816 SOUTH DR.
City-St-Zip: POLK CITY, FL 338689734

Title: S () Delete
Name: MERASHOFF, PAM
Address: 2118 KIRCKLAND LAKE DR.
City-St-Zip: AUBURNDALE, FL 33823 US

Title: D () Delete
Name: POITRAS, KAY
Address: 27 LAKE HAMILTON BEACH
City-St-Zip: HAINES CITY, FL 33844 US

Title: D () Delete
Name: WRIGHT, DORIS
Address: 4092 LAKE MARIANNA
City-St-Zip: WINTER HAVEN, FL 33881 US

Title: D () Delete
Name: THOMPSON, BILL
Address: 1592 AUBURN OAKS CT
City-St-Zip: AUBURNDALE, FL 33823 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DT (X) Change () Addition
Name: MANN, JOAN F
Address: 816 SOUTH DR.
City-St-Zip: POLK CITY, FL 338689734

Title: D (X) Change () Addition
Name: DESROCHERS, CHRIS
Address: 1335 37TH ST. N.W.
City-St-Zip: WINTER HAVEN, FL 33881 US

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

Title: D (X) Change () Addition
Name: NELSON, TRACY
Address: 1969 8TH ST. S.E.
City-St-Zip: WINTER HAVEN, FL 33880 US

Title: D (X) Change () Addition
Name: SILVEY, BILL
Address: 1845 5TH ST. S.E.
City-St-Zip: WINTER HAVEN, FL 33880 US

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: JOAN MANN

DT

02/03/2009

Electronic Signature of Signing Officer or Director

Date