

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 705239

**FILED**  
**Apr 02, 2012**  
**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:**

DESROCHERS, CHRISTOPHER A  
2504 AVE G NW  
WINTER HAVEN, FL 33880 US

**Name and Address of New Registered Agent:**

HAMANN, LOIS A  
499 ARNESON 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: LOIS A. HAMANN

04/02/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: WILLIAMS, HUGH E III  
Address: 202 PONTOTOC PLAZA  
City-St-Zip: AUBURNDALE, FL 33823 US

Title: DT  
Name: HAMANN, LOIS A  
Address: 499 ARNESON AVE.  
City-St-Zip: AUBURNDALE, FL 33823

Title: DV  
Name: KLEIN, REESE JR  
Address: 202 PONTOTOC PLAZA  
City-St-Zip: AUBURNDALE, FL 33823 US

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: HUGH E. WILLIAMS, III

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04/02/2012

Electronic Signature of Signing Officer or Director

Date