

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 04, 2004 8:00 am
Secretary of State

03-04-2004 90010 037 ****61.25

DOCUMENT # 710647

1. Entity Name

ST. ANDREW'S RESIDENCE OF THE PALM BEACHES,
INC.



Principal Place of Business

208 FERN ST
WEST PALM BEACH FL 33401

Mailing Address

208 FERN ST
WEST PALM BEACH FL 33401

2. Principal Place of Business

208 Fern Street
Suite, Apt. #, etc.

3. Mailing Address

208 Fern Street
Suite, Apt. #, etc.



MOORE

CR2E037 (11/03)

City & State

West Palm Beach Fl.
Zip 33401

City & State

West Palm Beach Fl.
Zip 33401

4. FEI Number

59-6180131

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

FLANIGAN, JOHN F.
625 N FLAGLER DR.
WEST PALM BEACH FL 33401

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE MANGRUM, JOHN REV ☐ Delete
NAME
STREET ADDRESS 6065 S VERDE TRAIL G313
CITY-ST-ZIP BOCA RATON FL 33433

TITLE PD ☐ Delete
NAME HAMILTON, REV. WM E.
STREET ADDRESS 100 N. PALM WAY
CITY-ST-ZIP LAKE WORTH FL 33460

TITLE D ☐ Delete
NAME FERRIN, HOWARD E.
STREET ADDRESS PO BOX 17919
CITY-ST-ZIP WEST PALM BCH FL 33416-7919

TITLE VD ☐ Delete
NAME HESS, RAY
STREET ADDRESS 234 INFANTA AVE.
CITY-ST-ZIP ROYAL PALM BCH. FL 33411

TITLE S ☐ Delete
NAME MUMBY, FRANK
STREET ADDRESS 8123 ANOROBORO COURT
CITY-ST-ZIP W. PALM BEACH FL 33433

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

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CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Theresa Williams E. Hammett*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 25, 2004
Date

561-655-1504
Daytime Phone #