

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90175 010 ****61.25

DOCUMENT # 714777

1. Entity Name
SAINT PETERS CHURCH, INC.



Principal Place of Business
**1416 SE 2ND TERR
DEERFIELD BCH, FL 33441**

Mailing Address
**1416 SE 2ND TERR
DEERFIELD BCH, FL 33441**

60033017

2. Principal Place of Business - No P.O. Box #
1416 SE 2ND TERR
Suite, Apt. #, etc.

3. Mailing Address
1416 SE 2ND TERR
Suite, Apt. #, etc.

City & State
DEERFIELD BCH, FL
Zip
33441
Country
USA

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DEERFIELD BCH, FL
Zip
33441
Country
USA

04282008 Chg-NP CR2E037 (12/06)

4. FEI Number
59-1215881
Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MATLEY-TOBIN, LYNN
1649 NE 53RD CT.
POMPANO BEACH, FL 33064**

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

**Filing Fee is \$61.25
Due by May 1, 2008**

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
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
ZWINGERT, ERICH A
101 HOMEWOOD BLVD.
DELRAY BEACH, FL 33445** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
MATLEY-TOBIN, LYNN
1649 NE 53RD CT.
POMPANO BEACH, FL 33064** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
GOLDBERG, ANN
26540 SANDLEFOOT BLVD.
BOCA RATON, FL 33428** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
CASTEEL, DORATHYT
1117 NW 30 STREET
WILTON MANORS, FL 33311** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CARY, ANN E
1313 SE 2ND TERR
DEERFIELD BEACH, FL 33041** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
SMITH, M. TRACY
7400 NW 18TH ST, #105
MARGATE, FL 33063** ☐ Change ☒ Addition

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

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
DAVIS, MARILYN
11350 HERON BAY BLVD #2616
CORAL SPRINGS, FL 33076** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
FAIRWEATHER, JUNE
5098 NW 41ST COURT
LAUDERDALE LAKES, FL 33319** ☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

M. TRACY SMITH

4/28/08 (954) 695-0336

Date Daytime Phone #