
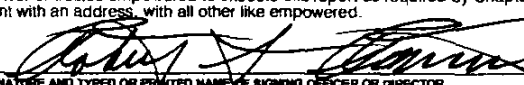


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 03, 2007 8:00 am**  
**Secretary of State**

04-03-2007 90016 025 \*\*\*\*61.25

<b>DOCUMENT # 724396</b> 1. Entity Name <b>SAN CRISTOBAL ASSOCIATION, INC.</b>					
Principal Place of Business <b>616 FLAMINGO DRIVE VENICE, FL 34285</b>			Mailing Address <b>406 GIOVANNI DRIVE NOKOMIS, FL 34275</b>		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number <b>59-1586903</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent  <b>RAASCH, SANDI 406 GIOVANNI DRIVE NOKOMIS, FL 34275</b>				7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE	<b>D</b> <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>CARTER, ALFRED</b>		NAME		
STREET ADDRESS	<b>616 FLAMINGO DR</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>VENICE, FL 00000, 34285</b>		CITY-ST-ZIP		
TITLE	<b>TD</b> <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>ZOCH, JAMES C</b>		NAME		
STREET ADDRESS	<b>1580 88TH AVE NORTH</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>ST PETERSBURG, FL 33702</b>		CITY-ST-ZIP		
TITLE	<input checked="" type="checkbox"/> Delete		TITLE	<b>D</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>RINGER, SUZANNE</b>		NAME		
STREET ADDRESS	<b>95 CEDAR STREET</b>		STREET ADDRESS		
CITY-ST-ZIP	<b>WAKEFIELD, MA 01880</b>		CITY-ST-ZIP		
TITLE	<b>SD</b> <input checked="" type="checkbox"/> Delete		TITLE	<b>P</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	<b>CRETSINGER, FRANK</b>		NAME	<b>ROBERT RANIERI</b>	
STREET ADDRESS	<b>616 FLAMINGO DR</b>		STREET ADDRESS	<b>228 HUDSON ST</b>	
CITY-ST-ZIP	<b>VENICE, FL 00000, 34285</b>		CITY-ST-ZIP	<b>HOBOKEN NJ 07030</b>	
TITLE	<b>D</b> <input checked="" type="checkbox"/> Delete		TITLE	<b>SVP</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	<b>COURTS, GLENN</b>		NAME	<b>WILLIAM MEADOWS</b>	
STREET ADDRESS	<b>616 FLAMINGO DR</b>		STREET ADDRESS	<b>100 E SECOND ST</b>	
CITY-ST-ZIP	<b>VENICE, FL 34285</b>		CITY-ST-ZIP	<b>FREDERICK MD 21701</b>	
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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.					
<b>SIGNATURE:</b>  <b>2/20/07</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					