

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 737735

FILED  
Apr 25, 2011  
Secretary of State

Entity Name: ST. ANDREWS COVE I CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

ASSOCIATION ACCOUNTING & MANAGEMENT  
40347 US 19N, SUITE 129  
TARPON SPRINGS, FL 34689 US

**New Principal Place of Business:**

**Current Mailing Address:**

ASSOCIATION ACCOUNTING & MANAGEMENT  
40347 US 19N, SUITE 129  
TARPON SPRINGS, FL 34689 US

**New Mailing Address:**

FEI Number: 59-1724369

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STAFFORD, BRUCE R  
ASSOCIATION ACCOUNTING & MANAGEMENT  
40347 U.S. 19 N STE. 129  
TARPON SPRINGS, FL 34689 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: KRIESLE, LORI  
Address: 2735 WHITNEY ROAD  
City-St-Zip: CLEARWATER, FL 33758

Title: TD  
Name: WRIGHT, BONNIE  
Address: 601 A KEENE RD N  
City-St-Zip: CLEARWATER, FL 33755

Title: SD  
Name: HALL, AMY  
Address: 643 KEENE RD N #D  
City-St-Zip: CLEARWATER, FL 33755

Title: DVP  
Name: MADDY, KATHLEEN  
Address: 627 KEENE RD N #D  
City-St-Zip: CLEARWATER, FL 32755

Title: D  
Name: SUGG, ELIZABETH  
Address: 627 KEENE RD N # 645A  
City-St-Zip: CLEARWATER, FL 32755

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: LORI KREISLE

PD

04/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date