

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

DOCUMENT# 741652

**FILED**  
**Mar 21, 2012**  
**Secretary of State**

**Entity Name:** SAINT JAMES THE FISHERMAN, INC.

**Current Principal Place of Business:**

MM 87.5 O/S HWY  
ISLAMORADA, FL 33036

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 509  
ISLAMORADA, FL 33036

**New Mailing Address:**

**FEI Number:** 59-1512694

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CANNON, III, ALBERRY C. REV  
MM 87.5 O/S HWY  
ISLAMORADA, FL 33036 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:** REV.  
**Name:** CANNON, ALBERRY C III  
**Address:** MM 87.5 O/S HWY.  
**City-St-Zip:** ISLAMORADA, FL 33036

**Title:** COV  
**Name:** LANE, MICHELLE  
**Address:** 76 SHORELAND DR.  
**City-St-Zip:** KEY LARGO, FL 33037

**Title:** F  
**Name:** HUBERT, ROCKY  
**Address:** 159 TAVERNIER TRAIL  
**City-St-Zip:** TAVERNIER, FL 33070

**Title:** SW  
**Name:** HOOVER, GLENN  
**Address:** 12 ROSE PLACE  
**City-St-Zip:** KEY LARGO, FL 33037

**Title:** PA  
**Name:** LANE, MICHELLE  
**Address:** 76 SHORELAND DR.  
**City-St-Zip:** KEY LARGO, FL 33037

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:** MICHELLE LANE

PA

03/21/2012

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

\_\_\_\_\_  
Date