

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759023

FILED
Mar 17, 2009
Secretary of State

Entity Name: ST. ANDREWS CHURCH

Current Principal Place of Business:

509 TWIGGS ST
TAMPA, FL 336023916

New Principal Place of Business:

Current Mailing Address:

509 TWIGGS ST
TAMPA, FL 336023916

New Mailing Address:

FEI Number: 59-0816461 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REESE, JOHN
509 E TWIGGS ST
TAMPA, FL 33602 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: DV () Delete
Name: BENTSCHNER, PAUL
Address: 5811 S. GORDON AVE.
City-St-Zip: TAMPA, FL 33611 US

Title: DS () Delete
Name: WOLFE, PATRICIA
Address: 501 ERIE AVE
City-St-Zip: TAMPA, FL 33606 US

Title: DP () Delete
Name: CARRAWAY, FRAZIER
Address: 48 ALBERMARLE AVE
City-St-Zip: TAMPA, FL 33606 US

Title: DT () Delete
Name: GETZ, ALLEN O
Address: 6402 SAND PEBBLE AVE
City-St-Zip: TEMPLE TERRACE, FL 33637 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DS (X) Change () Addition
Name: BAKER, PETER
Address: 3305 JEAN CIRCLE
City-St-Zip: TAMPA, FL 336295223 US

Title: DP (X) Change () Addition
Name: TIBBALS, WESLEY
Address: 109 S. GLEN AVENUE
City-St-Zip: TAMPA, FL 33609 US

Title: DT (X) Change () Addition
Name: SMITH, GREGG
Address: 1907 S. OAKMONT STREET
City-St-Zip: TAMPA, FL 336295944 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DAVID GREGORY SMITH

CFO

03/17/2009

Electronic Signature of Signing Officer or Director

_____ Date