

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 759023

**FILED**  
**Mar 30, 2010**  
**Secretary of State**

**Entity Name:** ST. ANDREWS CHURCH

**Current Principal Place of Business:**

509 TWIGGS ST  
TAMPA, FL 336023916

**New Principal Place of Business:**

509 E. TWIGGS ST  
TAMPA, FL 336023916

**Current Mailing Address:**

509 TWIGGS ST  
TAMPA, FL 336023916

**New Mailing Address:**

509 E. TWIGGS ST  
TAMPA, FL 336023916

**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  
Name: FERRELL, III, MARSHALL  
Address: 3321 W. PALMIRA AVENUE  
City-St-Zip: TAMPA, FL 33629 US

Title: DS  
Name: BAKER, PETER  
Address: 3305 JEAN CIRCLE  
City-St-Zip: TAMPA, FL 336295223 US

Title: DP  
Name: COBB, CHRISTOPHER  
Address: 3204 HOEDT ROAD  
City-St-Zip: TAMPA, FL 33618 US

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

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: DAVID GREGORY SMITH

CFO

03/30/2010

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

\_\_\_\_\_  
Date