

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 22, 2006 8:00 am**  
**Secretary of State**

02-22-2006 90014 009 \*\*\*\*61.25

**DOCUMENT # 760501**

1. Entity Name

THE ST. ANDREW'S SOCIETY OF WINTER PARK, INC.



Principal Place of Business

218 W. ORLANDO ST  
ORLANDO FL 32804  
US

Mailing Address

218 W. ORLANDO ST  
ORLANDO FL 32804  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2200517

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SEATER, THOMAS E  
218 W. ORLANDO ST  
ORLANDO FL 32804

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

*Thomas E. Seater*

2-7-06

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE VPD  
NAME BROWN, DAVID ☒ Delete  
STREET ADDRESS 1102 KOGER SHORES DRIVE  
CITY-ST-ZIP ORLANDO FL 32806

TITLE PD  
NAME MARSHALL, RICK ☐ Delete  
STREET ADDRESS 14511 HERTHA AVE  
CITY-ST-ZIP ORLANDO FL 32-8263

TITLE SD  
NAME ROSS, ELVA ☐ Delete  
STREET ADDRESS 1906 SUMMERFIELD RD  
CITY-ST-ZIP WINTER PARK FL 32792

TITLE TD  
NAME SEATER, THOMAS ☐ Delete  
STREET ADDRESS 218 W. ORLANDO ST  
CITY-ST-ZIP ORLANDO FL 32804

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VPD  
NAME Charles R. McGrew ☐ Change ☒ Addition  
STREET ADDRESS 480 Timber Ridge Dr.  
CITY-ST-ZIP Orlando, FL 32775

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE:

*Thomas E. Seater*

2-7-06

407-422-5641