

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90391 024 ****61.25

DOCUMENT # 762726

1. Entity Name
SAINT JOHN'S PARISH, INCORPORATED



Principal Place of Business
**% THE REV. DOUGLAS E. REMER
906 SOUTH ORLEANS AVENUE
TAMPA, FL 33606**

Mailing Address
**% THE REV. DOUGLAS E. REMER
906 SOUTH ORLEANS AVENUE
TAMPA, FL 33606**

40051500



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04132006

Chg-NP

CR2E037 (11/05)

4. FEI Number
59-0747309

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

**REMER, DOUGLAS E
906 SOUTH ORLEANS AVENUE
TAMPA, FL 33606**

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

Douglas E. Remer

DOUGLAS REMER

4/13/06

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing 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
NAME
STREET ADDRESS
CITY-ST-ZIP
**DJW
LOWKE, SCOTT
3517 OSPREY COVE DRIVE
RIVERVIEW, FL 33569** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MC ADAMS, CHRIS
820 DELAWARE AVENUE S.
TAMPA, FL 33606** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DSW
CARROLL, JAMES
3901 BAYSHORE BLVD.
TAMPA, FL 33611** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
MCIVER, BERNER S
828 BAYSIDE DRIVE
TAMPA, FL 33609** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
STRASKE, STEPHEN B
3302 MULLEN AVENUE
TAMPA, FL 33609** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DSW
STEPHEN STRASKE
3302 MULLEN AVENUE
TAMPA FL 33609** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DJW
JOE TIMBERLAKE
811 S ORLEANS AVE
TAMPA FL 33606** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
MCIVER BERNER
3612 GRANADA ST W
TAMPA FL 33629** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
DONALD GILBERT
3301 BAYSHORE BLVD # 2007
TAMPA FL 33629** ☐ Change ☒ Addition

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

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

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

Douglas E. Remer

4/13/06

813-835-1836

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #