

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004045

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** ST ANDREWS PARK PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

500 S AUSTRALIAN AVE, STE 120  
W PALM BCH, FL 33401

**New Principal Place of Business:**

DAVENPORT PROF PROP MGMT INC  
6620 LAKE WORTH RD, STE F  
LAKE WORTH, FL 33467

**Current Mailing Address:**

500 S AUSTRALIAN AVE, STE 120  
W PALM BCH, FL 33401

**New Mailing Address:**

DAVENPORT PROF PROP MGMT INC  
6620 LAKE WORTH RD, STE F  
LAKE WORTH, FL 33467

FEI Number: 65-1115302

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RHODES, PAUL  
500 S AUSTRALIAN AVE, STE 120  
W PALM BCH, FL 33401 US

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

CORPORATION SERVICE COMPANY  
1201 HAYS ST  
TALLAHASSEE, FL 32301 US

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: H. DAVIS

04/30/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: REGAN, JOHN  
Address: 6620 LAKE WORTH RD, STE F  
City-St-Zip: LAKE WORTH, FL 33467

Title: DVP  
Name: BOUTELL, MICHAEL  
Address: 6620 LAKE WORTH RD STE F  
City-St-Zip: LAKE WORTH, FL 33467

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: J. REGAN

PD

04/30/2012

Electronic Signature of Signing Officer or Director

Date