2002 UNIFORM BUSINESS REPORT (UBR)

Sep 05, 2002 8:00 am Secretary of State DOCUMENT # N0100004647 1. Entity Name 09-05-2002 90042 032 ****70.00 ST. THOMAS MANAGEMENT CORP. Principal Place of Business Mailing Address 309 "D" STREET 309 "D" STREET ST. AUGUSTINE FL 32080 ST. AUGUSTINE FL 32080 2. Principal Place of Business 3. Mailing Address 478 Campina St. 78 Andora St. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number 59-3728005 Applied For St. Augustine, FL St. Augustine, FL Not Applicable Zip 32086 Country 32086 Country **USA** \$8.75 Additional 5. Certificate of Status Desired TISA. 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) PELLICER, CHARLES E 28 CORDOVA ST. ST. AUGUSTINE FL 32084 City 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 . Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE After September 13, 2002, 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. min. will be \$236.25. Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete TITLE Change **GUENTHER, HOWARD** NAME McConnell, Sylvester T. STREET ADDRESS 245 SEAWIND DR. STREET ADDRESS 78 Andora St. CiTY-ST-ZIP CITY-ST-ZIP ST. AUGUSTINE FL 32080 <u>St. Augustine, FL 32086</u> TITLE To Delete ☐ Addition NAME DORAN, PAUL W NAME Doran, Paul W. STREET ADDRESS STREET ADDRESS 272 San Wicolas Way 272 SAN NICOLAS WAY CITY-ST-ZIP CITY-ST-ZIP St. Augustine, FL 32080 ST. AUGUSTINE FL 32080 TITLE Delete TITLE Change ☐ Addition NAME MULVEY, EDWARD J NAME Mulvey, Edward J. STREET ADDRESS ONE OCEAN TRACE, #460 STREET ADDRESS One Ocean Trace, #460 CITY-ST-ZIP CITY-ST-ZIP ST. AUGUSTINE FL 32080 St. Augustine, FL 32080 Delete TITLE DP . **Change** Addition MALARNEY, RONALD NAME Malarney, Ronald STREET ADDRESS 478 COMPINA ST. STREET ADDRESS 478 Campina St. CITY-ST-ZIE CITY-ST-ZIP ST. AUGUSTINE FL 32086 St. Augustine, FL 32086 TITLE Delete TITLE Change ☐ Addition CASALE, ARTHUR NAME Casale, Arthur NAME STREET ADDRESS 309 "D" ST. STREET ADDRESS 309 "D" St. CITY-ST-ZIP ST. AUGUSTINE FL 32080 CITY-ST-ZIP St. Augustine, FL 32080 TITLE ■ Delete TITLE ☐ Change Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 eath; 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 attackment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

NAME

changed, or on an attachment with an address, with all other like empowered.

LYNSKEY, PAUL M

310 MARSH POINT CIR.

ST. AUGUSTINE FL 32080

NAME

STREET ADDRESS

CITY-ST-ZIP

09-01-2002

73 Aloha Circle

Przybyski, Marion F.

St. Augustine, FL 32080

904-797-9422

FILED