

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01884

FILED
Mar 29, 2010
Secretary of State

Entity Name: ST. ANDREWS TOWNHOMES ASSOCIATION, INC.

Current Principal Place of Business:

659 JUBILEE ST.
MELBOURNE, FL 32940

New Principal Place of Business:

Current Mailing Address:

8534 EOLA CT
MELBOURNE, FL 32940

New Mailing Address:

FEI Number: 59-2503655

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, KATHERINE MS
8534 EOLA CT
MELBOURNE, FL 32940 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: D
Name: BERNKRANT, BRADLEY MR
Address: 654 JUBILEE STREET
City-St-Zip: MELBOURNE, FL 32940

Title: D
Name: SIMMONS, PETER MR
Address: 604 JUBILEE ST
City-St-Zip: MELBOURNE, FL 32940

Title: P
Name: SCHROEDER, WESLEY MR
Address: 634 JUBILEE ST
City-St-Zip: MELBOURNE, FL 32940

Title: T
Name: SIMMONS, KAREN MRS
Address: 604 JUBILEE STREET
City-St-Zip: MELBOURNE, FL 32940

Title: D
Name: MAYNARD, MARIE MRS
Address: 658 JUBILEE STREET
City-St-Zip: MELBOURNE, FL 32940

Title: V
Name: METCALF, ANN MS
Address: 631 JUBILEE ST
City-St-Zip: MELBOURNE, FL 32940

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: WES SCHROEDER

PRES

03/29/2010

Electronic Signature of Signing Officer or Director

Date