

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002368

FILED
Jan 27, 2012
Secretary of State

Entity Name: CITIZENS FOR THE PRESERVATION OF ST. AUGUSTINE, INC.

Current Principal Place of Business:

27 LOCUST ST
ST. AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 487
ST. AUGUSTINE, FL 320850487

New Mailing Address:

FEI Number: 51-0459261

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHIRMACHER, KATHRYN
27 LOCUST ST
SAINT AUGUSTINE, FL 32084 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: SIKES-KLINE, NANCY
Address: 15 MIRUELA AVE.
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: VD
Name: GREENBERG, BECKY
Address: 3 ST ANDREWS COURT
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: STD
Name: SCHIRMACHER, KATHRYN
Address: 27 LOCUST ST
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: VD
Name: SIMPSON, ALISON M
Address: 1306 SAN JOSE RD.
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: D
Name: WALLACE, ANTOINETTE B
Address: 104 LINCOLN ST
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: PD
Name: SEGAL, THERESA
Address: 126 ONEIDA ST
City-St-Zip: SAINT AUGUSTINE, FL 32084

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: KATHRYN SCHIRMACHER

STD

01/27/2012

Electronic Signature of Signing Officer or Director

Date