

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000008338

FILED  
Jan 06, 2012  
Secretary of State

**Entity Name:** ST.PAUL THE APOSTLE, INC.

**Current Principal Place of Business:**

8187 FORT DADE AVE.  
BROOKSVILLE, FL 34601

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 10742  
BROOKSVILLE, FL 34603

**New Mailing Address:**

**FEI Number:** 20-1547076

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARSH, JAMES  
7125 CAMBRIDGE ST  
SPRING HILL, FL 34609 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: MARSH, JAMES  
Address: 7125 CAMBRIDGE ST  
City-St-Zip: SPRING HILL, FL 34609

Title: D  
Name: MILLER, GERALD  
Address: 7516 MORELLI AVE.  
City-St-Zip: BROOKSVILLE, FL 34613

Title: D  
Name: CLANCY, MICHAEL  
Address: 7375 2ND LOOP AVE.  
City-St-Zip: BROOKSVILLE, FL 34613

Title: D  
Name: CLANCY, JANICE M  
Address: 7375 2ND LOOP AVE  
City-St-Zip: BROOKSVILLE, FL 34613

Title: D  
Name: MILLER, SHIRLEY  
Address: 7516 MORELLI AVE  
City-St-Zip: BROOKSVILLE, FL 34613

Title: D  
Name: DILTS, SUZANNE  
Address: 3265 MONTANO AVE.  
City-St-Zip: SPRING HILL, FL 34609

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:** GERALD MILLER

MR

01/06/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date