2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 02, 2007 8:00 am Secretary of State 04-02-2007 90063 027 ****61.25

DOCUMENT # N0500006928 1. Entity Name THE ST. AUGUSTINE FOUR, INC.									04-02-2007	7 90063	i 027 ****€	51.25	
Principal Place 151 KING STI ST AUGUSTIN	REET	Mailing Address 100 LINCOLN STREET ST AUGUSTINE, FL 32084						PH CP H BB H		111 81 81 18 51			
Principal Place of Business - No P.O. Box # Mailing Address													
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					01192007	Chg-NP	CR2E	037 (12/06)			
City & State			City & State					4. FEI Number 30-03328	51			oplied For ot Applicable	
Zip	Country		Zip		Cou	Country		5. Certificate of			\$8.75 Ad Fee Require		
	6. Name a	nd Address of Curren	Registere	egistered Agent			7. Name and Address of New Registered Agent						
JOHNSON, CARRIE 100 LINCOLN STREET						Street Address (P.O. Box Number is Not Acceptable)							
ST AUGUSTINE, FL 32084													
						City FL 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													
Filing Fee is \$61.25 Due by May 1, 2007 9. Election Campaign Financi Trust Fund Contribution.								\$5.00 May Be Added to Fees			eck payable to		
		I 11.			ADDITIONS/CHAN	IGES TO OFFICE	EDS VVID	DIRECTORS I	J 10				
TITLE	DP	OFFIGERS AND D	IRECTORS			.E	,	ADDITIONS/CHAIN		CH3 AND	Change	Addition	
NAME	EDWARDS	ΞY			AE								
STREET ADDRESS CITY-ST-ZIP	-151 KING S				EET ADDRESS (-ST-ZIP								
TITLE	ST AUGUSTINE, FL' 32084			☐ Delete							☐ Change	Addition	
NAME	JOHNSON, CARRIE												
STREET ADDRESS	STREET ADDRESS 151 KING STREET CITY-SI-ZIP ST AUGUSTINE, FL 32084												
TITLE	DS Delete					r-ST-ZIP .E	•		h		Mange	Addition	
NAME	MORRIS, RENEE			, NA			No	Forothy L. Bell (15/2): 2+)					
STREET ADDRESS	-					EET AODRESS Y-ST-ZIP	Dorothy L. Bell 249 Charlotte St. (15/2/ing St) St. Augustine, PL 32084						
TITLE	DT	STINE, PL 32004		Delete	TITE		_250	<u>r Augusotii</u>	es, FL 3.	2084	☐ Change	Addition	
NAME		, DOROTHY		T Detete	NAN			•				-	
STREET ADDRESS	151 KING					EET ADDRESS							
CITY-ST-ZIP	ST AUGUS	STINE, FL 32084		Па		Y-ST-ZIP					☐ Change	Addition	
NAME				☐ Delete	TITL NAM						□ change	∟ Addition	
STREET ADDRESS CITY-ST-ZIP						REET ADORESS Y-ST-ZIP							
TITLE				☐ Delete	TIT	 LE				•	Change	Addition	
NAME				E 8.87	NA								
STREET ADDRESS CITY-ST-ZIP						REET ADDRESS Y-ST-ZIP							
12. I hereby indicated of the co	certify that the	information supplied w tor supplemental report	th this filing is true and	does not qualify for accurate and that execute this renew	or the ex my signa		I ontained nave the apter 61	d in Chapter 119, F same legal effect a 7, Florida Statutes:	florida Statutes. as if made unde and that my na	I further or oath; that me appea	certify that the tlam an office rs in Block 10	information or director or Block 11 if	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 oath; that I am an officer or director of the corporation of 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 attachment with an address, with all other like empowered. SIGNATURE: 3-29-07													
PANDIC	OKE: F	72 M 122	DOMED NA	HE OF SIGNING OFFICES	XP NIPE	CTOR			Date		Daytime Phone #		