

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000008754

**FILED**  
**Feb 18, 2011**  
**Secretary of State**

**Entity Name:** HOLY TRINITY ANGLICAN CHURCH OF NASSAU COUNTY, INC.

**Current Principal Place of Business:**

1830 LAKE PARK DRIVE  
FERNANDINA BEACH, FL 32034

**New Principal Place of Business:**

**Current Mailing Address:**

1830 LAKE PARK DRIVE  
FERNANDINA BEACH, FL 32034

**New Mailing Address:**

**FEI Number:** 20-5412421

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ACREE, ANSLEY N  
95120 ALLIGATOR CREEK ROAD  
FERNANDINA BEACH, FL 32034 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:** P  
**Name:** ACREE, ANSLEY N  
**Address:** 95120 ALLIGATOR CREEK RD.  
**City-St-Zip:** FERNANDINA BEACH, FL 32034

**Title:** VP  
**Name:** ROBINSON, JAMES C  
**Address:** 9511 HILDRETH LANE  
**City-St-Zip:** FERNANDINA BEACH, FL 32034

**Title:** S/T  
**Name:** WEBER, JOHN V  
**Address:** 896 FOUNTAIN DR.  
**City-St-Zip:** FERNANDINA BEACH, FL 32034

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:** JAMES C. ROBINSON

VP

02/18/2011

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

\_\_\_\_\_  
Date