

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004644

FILED  
Apr 10, 2012  
Secretary of State

**Entity Name:** SOMEBODY CARES-ST. AUGUSTINE, INC.

**Current Principal Place of Business:**

45 SURF DR.  
ST. AUGUSTINE, FL 32080

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 840081  
ST. AUGUSTINE BCH, FL 320800081

**New Mailing Address:**

P. O. BOX 840081  
ST. AUGUSTINE BCH, FL 320800081 SA

**FEI Number:** 26-0188459

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CLIFTON, JOHN T  
45 SURF DR.  
ST. AUGUSTINE, FL 32080 US

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

CLIFTON, JOHN T PRESIDE  
45 SURF DR.  
ST. AUGUSTINE, FL 32080 US

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: JOHN T. CLIFTON

04/10/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: CLIFTON, JOHN T PRESIDE  
Address: 45 SURF DR.  
City-St-Zip: ST. AUGUSTINE, FL 32080 SA

Title: D  
Name: FRENIER, MARK DIRECTO  
Address: 5605 US1 SOUTH  
City-St-Zip: ST. AUGUSTINE, FL 32086 SA

Title: DIRE  
Name: ROGERS, JEFF DIRECTO  
Address: 509 WEEPING WILLOW LANE  
City-St-Zip: ST. AUGUSTINE, FL 32080 SA

Title: D  
Name: DETTRA, RICHARD  
Address: 4320 A1A SOUTH  
City-St-Zip: ST. AUGUSTINE, FL 32080 SA

Title: D  
Name: AEPPLI, RICK  
Address: 180 MARSH ISLAND CIRCLE  
City-St-Zip: ST. AUGUSTINE, FL 32095 SA

Title: DIRE  
Name: MULL, TODD  
Address: 2020 DEERWOOD ACRES DR.  
City-St-Zip: ST. AUGUSTINE, FL 32084 SA

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: JOHN T. CLIFTON

PRES

04/10/2012

Electronic Signature of Signing Officer or Director

Date