2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011598

Entity Name: ST. GILES MANOR II, INC.

FILED Apr 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5041 82ND AVENUE NORTH PINELLAS PARK, FL 33781 **Current Mailing Address: New Mailing Address:** 5041 82ND AVENUE NORTH PINELLAS PARK, FL 33781 FEI Number: 26-1551974 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WASSON, SANDRA 8381 56TH WAY NORTH PINELLAS PARK, FL 33781 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition PONDER, JAMES E D PONDER, JAMES E D Name: Name: 2753 60TH STREET NORTH Address: 2753 60TH STREET NORTH Address: City-St-Zip: ST. PETERSBURG, FL 33710 City-St-Zip: ST. PETERSBURG, FL 33710 Title: () Delete Title: (X) Change () Addition HARNETT, JOHN Name: HARNETT, JOHN REV Name: Address: 8271 52ND STREET SOUTH Address: 8271 52ND STREET SOUTH City-St-Zip: PINELLAS PARK, FL 33761 City-St-Zip: PINELLAS PARK, FL 33761 Title: () Delete Title: (X) Change () Addition WASSON, SANDRA WASSON, SANDRA Name: Name: 8381 56TH WAY NORTH Address: 8381 56TH WAY NORTH Address: City-St-Zip: PINELLAS PARK, FL 33781 City-St-Zip: PINELLAS PARK, FL 33781 Title: () Delete Title: () Change () Addition Name: LOFGREEN, GENE Name: 5220 90TH TERRACE NORTH Address: Address: City-St-Zip: PINELLAS PARK, FL 33761 City-St-Zip: Title: () Delete Title: (X) Change () Addition LEMON, DANIEL LEMON, DANIEL Name: Name: 125 MARON STREET N.E. 125 MARON STREET N.E. Address: Address: City-St-Zip: ST PETERSBURG, FL 33704 City-St-Zip: ST PETERSBURG, FL 33704 Title: () Delete Title: () Change (X) Addition TRIMBLE, BRIAN Name: Name: Address: Address: 2083 59TH STREET NORTH ST. PETERSBURG, FL 33710 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: SANDRA WASSON S 04/14/2009