## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N19845

FILED Apr 03, 2012 Secretary of State

Entity Name: ST. ANDREW CHRISTIAN CARE CENTER, INC.

Current Principal Place of Business: New Principal Place of Business:

3001 WEST US HIGHWAY 98 PANAMA CITY, FL 32401 US

Current Mailing Address: New Mailing Address:

3001 WEST US HIGHWAY 98 PANAMA CITY, FL 32401 US

FEI Number: 59-2793858 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

HOLLEY, WINDELL 3721 W 25TH ST

PANAMA CITY, FL 32405 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:

Title: PD

 Name:
 HOLLEY, WINDELL

 Address:
 3721 W 25TH STREET

 City-St-Zip:
 PANAMA CITY, FL 32405 US

Title: VD

 Name:
 FLOYD, LEWIS

 Address:
 4100 MARRIOTT DR #609

 City-St-Zip:
 PANAMA CITY, FL 32408 US

Title: STD

Name: WHITTLE, JANICE Address: 115 E 2ND PLACE

City-St-Zip: PANAMA CITY, FL 32401 US

Title:

Name: CRUTCHFIELD, MARJORIE Address: 2401 TRINITY STREET City-St-Zip: LYNN HAVEN, FL 32444 US

Title: D

 Name:
 COLLINS, CLARENCE C

 Address:
 2607 PAIGE CIRCLE

 City-St-Zip:
 PANAMA CITY, FL 32405 US

Title:

 Name:
 GIBSON, CARRIE

 Address:
 337 SHIRLEY DRIVE

 City-St-Zip:
 PANAMA CITY, FL 32404 US

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: WINDELL HOLLEY PD 04/03/2012