1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # N9300005607



03-01-1999 90235 042 ****70.00

1. Corporation Name SAINT ANDREW CIVIC CLUB, INC.						
Principal Place of Business Mailing Address 2629 W 10TH STREET 2629 W 10TH STREET ATTN. WILLARD NELSON ATTN. WILLARD NELSON PANAMA CITY FL 32401 PANAMA CITY FL 32401						
T PREMIUM ON THE	N. C.					<u> </u>
Principal Place of Business 2a. Mailing Address			····-		Date Incorporated or Qualifed	\neg
21	26				12/06/1993	_
⊢ ¬ ''	Suite, Apt, #, etc. Suite, Apt, #, etc.		•		4. FEI Number Applied For 59-3248052 Not Applied	nlo.
City & Stat	City & State City & State				\$8.75 Additional)ie
23	,				5. Certificate of Status Desired Fee Required.	
Zip	Country Zip		Country		6. Election Campaign Financing S5.00 May Be	
24	25 29 30		30		Trust Fund Contribution Added to Fees	
	9. Name and Address of Current	Registered Agent		,	10. Name and Address of New Registered Agent	_
			81	Name		
NELSON, WILLARD			82	Street Add	dress (P.O. Box Number is Not Acceptable)	
2629 W. 10TH ST.						
PANAMA (CITY FL 32401		83	1	•	- 1
			84	City	FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 617,0502	and 617.1508. Florida Statute	s, the abov	e-named cor		d
office or r	egistered agent, or both, in the State or m familiar with, and accept the obligation	f Florida. Such change was au	thorized by	the corporat	rporation submits this statement for the purpose of changing its registere- tion's board of directors. I hereby accept the appointment as registered	ı
SIGNATURE	m tanniar with, and accept the obligation					
	Signature, typed or printed name of registered agent	<u></u>		nt signature requi	ired when reinstating) DATE DATE	
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TRLE			1.1 TITLE	1	- 1,50	
NAME			1.2 NAME		James McVeigh	
STREET ADDRESS	1236 BECK AVE.		1		1404 Beach Drive Panyma oth FL 32401	
CITY-ST-ZIP			1.4 CITY-5 2.1 TITLE	ST-ZIP		ition
TITLE	~			4	3 . D	
NAME			2.2 NAME	TADORESS I		
STREET ADDRESS	The sales and the sales and the sales are a sales and the sales are a sales and the sales are a sales			I	- ^ ^ / ^ / ^ / ^ / / / / / / / / / / /	•
CITY-ST-ZIP			2. 4 CITY- 3.1 TITLE	S1-ZIP P	Change Cod	ition
NAME	_		32 NAME		tarbast H Hinson	
STREET ADDRESS	O COO MY COTT OF		V.2.12	TADDRESS 2	2913 W. 11+5 Street	
CITY-ST-ZIP	PANAMA CITY FL		3.4. CITY-		Panama City, FL 32401	
TITLE	D	EZÐELETE	4.1 TITLE	02	☐ Change ☐ ☐ Change	ition
NAME	NELSON, WILLARD		4,2 NAME		steve Rubin	l
STREET ADDRESS	205 SHERRITT BRANCH ROAD		4.3 STREE		1334 cine)natto Ave	
CITY-ST-ZIP	SOUTHPORT FL		4,4 CITY-5	ST-ZIP	Panama City, FL 32401	
TITLE		☐ DELETE	5.1 TITLE	1 1	D ∴ Change ∴ Add	ition
NAME			5.2 NAME	Ň	ulliard Nelson	
STREET ADDRESS			5.3 STREE		LOS Shenriff Branch Rd	
CITY-ST-ZIP			5.4 CITY-5	ST-ZIP	Panama City, FL 32409	
		☐ DELETE	6.1 TITLE		☐ Change ☐ Add	ttion
TITLE		□ DECETE		}		
TITLE NAME		Decere	6.2 NAME	T ADDRESS		

City-St-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.