2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 27, 2006 8:00 am DOCUMENT # N93000005607 **Secretary of State** 02-27-2006 90085 003 ****70.00 SAINT ANDREW CIVIC CLUB, INC. Principal Place of Business Mailing Address 2629 W 10TH STREET ATTN. WILLARD NELSON 205 SHERRETT BRANCH RD ATTN, WILLARD NELSON PANAMA CITY FL 32401 PANAMA CITY FL 32401 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 1st MOORE CR2E037 (10/05) Applied For City & State City & State 4. FEI Number 59-3248052 Not Applicable Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent NELSON, WILLARD Street Address (P.O. Box Number is Not Acceptable) 205 SHERRETT BRANCH RD PANAMA CITY FL-32409 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable FILE NOW: FEE IS \$61.25 Make Check Payable to Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2006 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. Delete TITLE TITLE Tom PATERICK GIBSON, DONNA NAME NAM 14308 NW ABBOTT Rd SCOTTS FERRY, FL 32449 STREET ADDRESS 1113 BACK AVE STREET ADDRESS PANAMA CITY BEACH FL 32413 CITY-ST-ZIP PD ☐ Change Addition ☐ Delete TITLE LONGE, DEBBIE LONGE, DEBBIE NAME 912 MULBERRY AVE 1118 BAY VIEW AVE STREET ADDRESS STREET ADDRESS PANAMA CITY FL 32404 CITY-ST-ZIP PANAMA CITY. 3240 l CITY-ST-ZIP Change ☐ Addition VD TITLE Delete TITLE MCVEIGH, JAMES MAME NAME STREET ADDRESS 1404 W BEACH DR STREET ADDRESS PANAMA CITY FL 32401 CITY-ST-ZIP CITY-ST-7IF ☐ Delete ☐ Change ■ Addition PULLEN, GERRI NAME STREET ADDRESS 8522 N. LAGOON DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PANAMA CITY FL ☐ Delete Change ☐ Addition TITLE TITLE NELSON, WILLARD NAME NAME 205 SHERRETT BRANCH RD. STREET ADDRESS STREET ADDRESS PANAMA CITY FL 32409 CITY-ST-ZIP CITY-ST-7IF ☐ Addition Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. 2/9/06 872-1180

SIGNATURE: William