

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Feb 13, 2007 8:00 am
Secretary of State

02-13-2007 90048 003 ****70.00



DOCUMENT # N93000005607

1. Entity Name

SAINT ANDREW CIVIC CLUB, INC.

Principal Place of Business

2629 W 10TH STREET
ATTN. WILLARD NELSON
PANAMA CITY FL 32401

Mailing Address

205 SHERRETT BRANCH RD
ATTN. WILLARD NELSON
PANAMA CITY FL 32401



1st MOORE CR2E037 (10/06)

2. Principal Place of Business - No P.O. Box #

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-3248052

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NELSON, WILLARD
205 SHERRETT BRANCH RD
PANAMA CITY FL 32409

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
CD	PATERICK, TOM	14308 NW RABBOTT RD	SCOTTS FERRY FL 32449	<input type="checkbox"/>
PD	LONGE, DEBBIE	1118 BAY VIEW AVE PANAMA CITY FL 32404		<input type="checkbox"/>
VD	MCVEIGH, JAMES	1404 W BEACH DR	PANAMA CITY FL 32401	<input checked="" type="checkbox"/>
SD	PULLEN, GERRI	8522 N. LAGOON DR	PANAMA CITY FL	<input checked="" type="checkbox"/>
TD	NELSON, WILLARD	205 SHERRETT BRANCH RD.	PANAMA CITY FL 32409	<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
PD	LONGE, DEBBIE	1213 E. 5th STREET	PANAMA CITY, FL 32401	<input checked="" type="checkbox"/>	<input type="checkbox"/>
VD	MILLER, JOSHALYN	1316 BECK AVENUE	PANAMA CITY, FL 32401	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SD	WERNER, DEBRA	1316 BECK AVENUE	PANAMA CITY, FL 32401	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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.

SIGNATURE: *Willard Nelson* Willard Nelson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/26/07

Date

872 1180
265 3451

Daytime Phone #