

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005607

FILED  
Apr 27, 2011  
Secretary of State

**Entity Name:** SAINT ANDREW CIVIC CLUB, INC.

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

**FEI Number:** 59-3248052      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

NELSON, WILLARD  
205 SHERRETT BRANCH RD  
PANAMA CITY, FL 32409 US

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

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: CD  
Name: NELSON, WILLARD  
Address: 205 SHERRETT BRANCH ROAD  
City-St-Zip: PANAMA CITY, FL 32409

Title: PD  
Name: PULLEN, GERALDINE  
Address: 8522 N. LAGOON DRIVE  
City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: VD  
Name: DEEGINS, JOHN  
Address: 601 MINNESOTA AVE  
City-St-Zip: LYNN HAVEN, FL 32444

Title: SD  
Name: HERTZ, CAROL  
Address: 10200 RESOTA BEACH ROAD  
City-St-Zip: PANAMA CITY, FL 32409

Title: TD  
Name: LONGE, DEBBIE  
Address: 1213 E. 5TH STREET  
City-St-Zip: PANAMA CITY, FL 32401

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: WILLARD NELSON

CD

04/27/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date