

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005480

FILED
May 08, 2012
Secretary of State

Entity Name: ST. ANDREWS ISLE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4129 MELROSE CT
MELBOURNE, FL 32940

New Principal Place of Business:

Current Mailing Address:

ST. ANDREWS ISLE HOMEOWNERS ASSOCIATION
P.O. BOX 410948
MELBOURNE, FL 32941

New Mailing Address:

FEI Number: 59-3658662 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SINGER, II, HENRY L
4129 MELROSE CT
MELBOURNE, FL 32940 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: DVP
Name: GEIST, BOB
Address: 4104 MELROSE CT.
City-St-Zip: MELBOURNE, FL 32940

Title: TD
Name: SINGER, HENRY L
Address: 4129 MELROSE CT
City-St-Zip: MELBOURNE, FL 32940

Title: PD
Name: ROZEK, TOM
Address: 4220 STONEY POINT RD
City-St-Zip: MELBOURNE, FL 32940

Title: DVP
Name: KONECSNY, GABE
Address: 4117 MELROSE CT.
City-St-Zip: MELBOURNE, FL 32940

Title: DS
Name: CAIN, RUDY
Address: 4190 STONEY POINT RD>
City-St-Zip: MELBOURNE, FL 32940

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: HENRY L. SINGER II

TD

05/08/2012

Electronic Signature of Signing Officer or Director

Date