

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003098

FILED
Jan 06, 2011
Secretary of State

Entity Name: SAINT PAUL DEVELOPMENT CENTER, INC.

Current Principal Place of Business:

83 WASHINGTON STREET
ST. AUGUSTINE, FL 32084

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4108
ST. AUGUSTINE, FL 32085

New Mailing Address:

FEI Number: 59-3517331

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRIFFIN, MARK L
1627 ROGERO ROAD
JACKSONVILLE, FL 32211 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: P
Name: RAWLS, RONALD REV.
Address: 8007 SW 52ND LN
City-St-Zip: GAINESVILLE, FL 32608

Title: T
Name: BACKMAN, INA F
Address: 833 W 3RD ST
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: T
Name: BRYANT, JACQUELINE
Address: 904 CHIPPAWA ST.
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: D
Name: CHASE, DIANNE
Address: 817 W 2ND STREET
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: T
Name: STEVENSON, BEN
Address: 855 COLLIER BLVD
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: T
Name: RAMSEY-JONES, JOYCE
Address: 60 PALMER ST
City-St-Zip: SAINT AUGUSTINE, FL 32084

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: RONALD RAWLS

REV.

01/06/2011

Electronic Signature of Signing Officer or Director

Date