

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002964

FILED  
Aug 31, 2007  
Secretary of State

**Entity Name:** ST. JOHNS COUNTY CULTURAL COUNCIL, INC.

**Current Principal Place of Business:**

370 A1A BEACH BLVD  
ST. AUGUSTINE, FL 32080 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 840145  
ST AUGUSTINE, FL 32080

**New Mailing Address:**

**FEI Number:** 59-3581209 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

ROWLAND, VIRGINIA E  
41 SANDPIPER DR  
SAINT AUGUSTINE, FL 32080 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 ( ) Delete  
Name: ROWLAND, VIRGINIA E  
Address: 41 SANDPIPER DR  
City-St-Zip: SAINT AUGUSTINE, FL 32080

Title: D ( ) Delete  
Name: JOHNSON, DAVID  
Address: 44 ANDALUSIA COURT  
City-St-Zip: ST AUGUSTINE, FL 32086

Title: S ( ) Delete  
Name: BLEDSON, TOM  
Address: 31 COLONY ST  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: D ( ) Delete  
Name: THOMAS, LES  
Address: 32 CORDOVA STREET  
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: T ( ) Delete  
Name: MCALOON, MANDEE  
Address: 46 SURF DRIVE  
City-St-Zip: ST AUGUSTINE, FL 32080

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MANDEE MCALOON

TREA

08/31/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date