

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000003783

**FILED**  
**Apr 21, 2010**  
**Secretary of State**

**Entity Name:** ST. AUGUSTINE CENTRE TRANSPORTATION DEMAND MANAGEMENT ORGANIZATION, INC.

**Current Principal Place of Business:**

1431 ORANGE CAMP ROAD  
SUITE 116  
DELAND, FL 32724 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 953544  
LAKE MARY, FL 327953544 US

**New Mailing Address:**

**FEI Number:** 59-3621775

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PHELPS, SPENCER  
1431 ORANGE CAMP ROAD  
SUITE 116  
DELAND, FL 32724 US

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

CANNON, FRANK  
1431 ORANGE CAMP ROAD  
SUITE 116  
DELAND, FL 32724 US

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: FRANK CANNON

04/21/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: CANNON, FRANK J  
Address: 1431 ORANGE CAMP ROAD, SUITE 116  
City-St-Zip: DELAND, FL 32724

Title: SD  
Name: BAILEY, JOHN D JR  
Address: 780 NORTH PONCE DE LEON BLVD.  
City-St-Zip: ST. 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: FRANK CANNON

PD

04/21/2010

Electronic Signature of Signing Officer or Director

Date