FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V67799

ST. ANDREWS PARK PLACE, INC.

(9)

FILED Aug 07 1997 8:00am Secretary of State



Principal Place of Business Mailing Address									-			
104 ROCK BRIDGE ROAD 104 ROCK BRIDGE ROAD DOTHAN AL 36303-2100												
								Ì	3. Date Incorporated or Qualified 3a. Date of Last Report 12/11/1996			
2. Principal Place of Business 2a. Mailing Address									4. FEI Number			pplied For
21 Suite Ant	4 -4-	26	26					63-1101631 Not Applicable				
Suite, Apt	•		Suite, Apt. #, etc.					5. Certificate of Status Desired S8.75 Additional Fee Required				
City & Sta	ale		28	City & State 28					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip Country				— — — — — — — — — — — — — — — — — — —			Country		8. This corporation has liability for	intangible	tax under	s. 199.032,
24 25 9. Name and Address of Curren				29 30				Florida Statutes				
			f Current Reg	istered Agent		81	1 61		10. Name and Address of New Ro	gistered	Agent	
MACLIN, HR., HENRY W 200 GULF SHORE DRIVE							Nam	ie				
	GULF SHUI STIN FL 3254						Stree	et Address	Address (P.O. Box Number is Not Acceptable)			
						83						
						84	City			FL	85 Zip	Code
I OHICE OF	registereo age	ons of Sections ent, or both, in t h, and accept t	no State of Fig	orida. Such cha	inge was aut	horized b	v the c	ed corporation	ation submits this statement for the poly accepts a display and a directors. I hereby accepts accepts accepts accepts accepts a display accepts accepts and accepts accepts accepts accepts a display accepts accepts a display acce	ourpose of pt the app	changing i	its registered registered
SIGNATURE					7.0005, FIDRIC	ia Statute	S.					
Signature, typed or printed name of registered agent and title if applicable (NOTE-							ont signat	ure required v	when reinstating)	DATE		
12.	PDT	OFFIC	ERS AND DIH		DELETE	13.			ADDITIONS/CHANGES TO OFFI	CERS AND		
NAME	PARSONS	DAVID		LJ	ALLE IL	1.1 TITLE					∐ Change	Addition
STREET ADDRESS		BRIDGE ROA	ND.			1.2 NAME 1.3 STREE	I ADDOLO					
CITY-ST-ZIP	DOTHAN A		10			1.4 CITY-3		³	•			
TITLE	CD				ELETE	2.1 TITLE	51-ZIP	co			Change	Addition
NAME	MALUGEN	. JORZ T				2.2 NAME			TO T		Onlinge	L Addition
STREET ADDRESS		EOLA STREET	ľ			2.3 STREET	I ADDRES	11010	gen, Joe T Oscepla Street			
CITY-ST-ZIP	DOTHAN A					2. 4 CITY-		R	en 11 36301			
TITLE	VP\$)ELETE	3.1 T(TLE	21-211	- KORO IIV	an 1 w 3 3 3 0 1		Change	Addition
NAME	WILSON, S	STEVIE				3.2 NAME						
STREET ADDRESS 3121 ROSS CLARK CIRCLE, SUITE 1						3.3 STREET	ADDRES!	s l				
CITY-ST-ZIP	DOTHAN A		•			3.4. CITY-						
TITLE	VP	···			ELETE	4.1 TITLE		1			Change	Addition
NAME	WILSON, C	SEORGE				4. 2 NAME					-	
STREET ADDRESS		S CLARK CIR	CLE, SUITE	1		4.3 STREET	ADDRESS	3				
CITY-ST-ZIP	DOTHAN A		•			4.4 CiTY+5	ST-ZIP					
TITLE					ELETE	5.1 TITLE		1			Change	Addition
NAME					İ	5.2 NAME					_ •	
STREET ADDRESS						5.3 STREET	ADDRESS	3				
CITY-ST-ZIP	[.					5.4 CITY - S						j
TITLE			-1		ELETE	6.1 TITLE	<u></u>	1			☐ Change	Addition
NAME						6.2 NAME					_ •	
STREET ADDRESS						6.3 STREET	ADDRESS	3				-
CITY-ST-ZIP						6.4 CITY - S		1				

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report for supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charging or on an allach pent with an address.

SIGNATURE:

374-193-3122