

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 739936

**FILED**  
**Feb 21, 2015**  
**Secretary of State**  
**CC2524113759**

**Entity Name:** THE SAINT ANDREW'S SOCIETY OF JACKSONVILLE, FLORIDA, INC.

**Current Principal Place of Business:**

1208 8TH STREET NORTH  
JACKSONVILLE BEACH, FL 32250

**Current Mailing Address:**

1208 8TH STREET NORTH  
JACKSONVILLE BEACH, FL 32250 US

**FEI Number: 59-1860792**

**Certificate of Status Desired: Yes**

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

VERDIN, CHRISTINE  
1208 8TH STREET NORTH  
JACKSONVILLE BEACH, FL 32250 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title           PRES  
Name           BURKE, KEVIN  
Address        1103 DEFENDER CT. W.  
City-State-Zip: ATLANTIC BEACH FL 32233-

Title           VP  
Name           JESSE, KAREN  
Address        PO BOX 37374  
City-State-Zip: JACKSONVILLE FL 32236-7374

Title           SEC  
Name           BRANCH, JOAN  
Address        4332 WINDERGATE DR  
City-State-Zip: JACKSONVILLE FL 32257-3933

Title           TD  
Name           VERDIN, CHRISTINE  
Address        1208 8TH STREET NORTH  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title           MS  
Name           DELAURO, DAWN  
Address        2610 SR A1A APT#1007  
City-State-Zip: ATLANTIC BEACH FL 32233

*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: CHRISTINE VERDIN**

**TREASURER**

**02/21/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date