

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743105

Entity Name: THE SAINT ANDREW SOCIETY OF TALLAHASSEE, INC.

Current Principal Place of Business:

9036 MUIRFIELD COURT
TALLAHASSEE, FL 32312-4005

Current Mailing Address:

PO BOX 12034
TALLAHASSEE, FL 32317

FEI Number: 80-0473144

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHERRY, JESSE GARY JR.
9036 MUIRFIELD COURT
TALLAHASSEE, FL 32312-4005 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: JESSE GARY CHERRY JR

02/14/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TRUSTEE
Name MCCAFFREY, PATRICK
Address PO BOX 12034
City-State-Zip: TALLAHASSEE FL 32317

Title PRESIDENT
Name GRAHAM, WILLIAM
Address PO BOX 12034
City-State-Zip: TALLAHASSEE FL 32317

Title TREASURER
Name CHERRY, JESSE GARY JR.
Address 9036 MUIRFIELD COURT
City-State-Zip: TALLAHASSEE FL 32312-4005

Title COMMUNICATIONS
Name KING, ERIC
Address PO BOX 12034
City-State-Zip: TALLAHASSEE FL 32317

Title TRUSTEE
Name JOHNSON, CHARLES
Address PO BOX 12034
City-State-Zip: TALLAHASSEE FL 32317

Title VP
Name MCKIBBEN, BRUCE
Address PO BOX 12034
City-State-Zip: TALLAHASSEE FL 32317

Title MEMBERSHIP
Name BORGES, BETSY
Address PO BOX 12034
City-State-Zip: TALLAHASSEE FL 32317

Title TRUSTEE
Name SCOTT, NANCY
Address PO BOX 12034
City-State-Zip: TALLAHASSEE FL 32317

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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: JESSE GARY CHERRY JR.

TREASURER

02/14/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TRUSTEE
Name FRAZIER, LINDA
Address PO BOX 12034
City-State-Zip: TALLAHASSEE FL 32317

Title CHAPLAIN
Name MCKIBBEN, CANDACE
Address PO BOX 12034
City-State-Zip: TALLAHASSEE FL 32317

Title TRUSTEE
Name TURNER, DANIE
Address PO BOX 12034
City-State-Zip: TALLAHASSEE FL 32317

Title SECRETARY
Name LAMONT, KRISTINE
Address PO BOX 12034
City-State-Zip: TALLAHASSEE FL 32317

Title TRUSTEE
Name BULL, TOMMY
Address PO BOX 12034
City-State-Zip: TALLAHASSEE FL 32317

Title EDUCATOR
Name BREEZE, JAY
Address PO BOX 12034
City-State-Zip: TALLAHASSEE FL 32317