2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N04000008338

Entity Name: ST.PAUL THE APOSTLE, INC.

Current Principal Place of Business:

1296 LORI DR

SPRING HILL, FL 34606

Current Mailing Address:

1296 LORI DR

SPRING HILL, FL 34606 US

FEI Number: 20-1547076 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JAMES, CAROLINE 3301 SUSAN DR SPRING HILL, FL 34606 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: CAROLINE JAMES 08/18/2021

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title Title D

Name MILLER, SHIRLEY Name PADURANO, STEVE 3138 GLENBROOK AVE Address 7516 MORELLI AVE Address City-State-Zip: SPRING HILL FL 34609 BROOKSVLLE FL 34613 City-State-Zip:

Title Title

Name SPADAFORA, REGINA SPADAFORA, VINCENT Name Address 13425 CHESAPEAKE PL Address 13425 CHESAPEAKE PL City-State-Zip: SPRING HILL FL 34609 City-State-Zip: SPRING HILL FL 34609

Title Title D

Name LARKIN, SYLVIA JAMES, CAROLINE Name Address 15031 BAILEY HILL RD Address 3301 SUSAN DR City-State-Zip: BROOKSVILLE FL 34614 SPRING HILL FL 34606 City-State-Zip:

Title D Title D

VALENTINE, ROBIN Name Name JAMES, JOHN J Address 17231 RIDGELINE TRAIL Address 3301 SUSAN DR City-State-Zip: HUDSON FL 34667

City-State-Zip: SPRING HILL FL 34606

Continues on page 2

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.

08/18/2021 SIGNATURE: CAROLINE JAMES D

Electronic Signature of Signing Officer/Director Detail

Date

FILED

Aug 18, 2021

Secretary of State 8442499384CC

Officer/Director Detail Continued:

Title D

Name THOMAS, ROZ

8133 FOREST VILLAS CIR APT D Address

City-State-Zip: SPRING HILL FL 34606