

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000007264

**Entity Name:** SAINT ANDREWS PRESBYTERIAN CHURCH, INC.

**Current Principal Place of Business:**

500 N PARK ROAD  
HOLLYWOOD, FL 33021

**Current Mailing Address:**

500 N PARK ROAD  
HOLLYWOOD, FL 33021 US

**FEI Number:** 46-1537558

**Certificate of Status Desired:** No

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

CAMPO, T.J.  
500 N PARK ROAD  
HOLLYWOOD, FL 33021 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 DIRECTOR  
Name KELSEY, CHARLES M JR.  
Address 1619 SE 7 ST.  
City-State-Zip: FT. LAUDERDALE FL 33316

Title TREASURER  
Name CATES, MATTHEW A  
Address 12134 SW 4 STREET  
City-State-Zip: PEMBROKE PINES FL 33025

Title DIRECTOR  
Name SAYOUR, GEORGE  
Address 2000 N 40 AVENUE  
City-State-Zip: HOLLYWOOD FL 33021

Title DIRECTOR  
Name BOXE, NORMAN D  
Address 2430 SW 86TH AVENUE  
City-State-Zip: MIRAMAR FL 33025

Title DIRECTOR  
Name POULOS, EVANGELOS DR.  
Address 5100 SW 70 AVE  
City-State-Zip: DAVIE FL 33314

*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:** MATTHEW A CATES

**TREASURER**

**04/30/2016**

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

\_\_\_\_\_  
Date