2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400000640

Entity Name: TALE TELLERS OF ST. AUGUSTINE, INC.

FILED May 09, 2019 **Secretary of State** 8403734421CC

Current Principal Place of Business:

37205 HARBOUR VISTA CIRCLE SAINT AUGUSTINE. FL 32080

Current Mailing Address:

37205 HARBOUR VISTA CIRCLE SAINT AUGUSTINE. FL 32080 US

FEI Number: 65-0488736 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHRISTINE, RABIEGA M 37205 HARBOR VISTA CIRCLE SAINT AUGUSTINE, FL 32080 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: CHRISTINE M. RABIEGA 05/09/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title **PRESIDENT** Title VΡ

O'HARA, SALLIE Name WELLER, DEBRA Name

PO BOX 6 Address 501 LOS CAMINOS ST. Address

City-State-Zip: SAINT AUGUSTINE FL 32095 ST AUGUSTINE FL 32085 City-State-Zip:

Title **SECRETARY** Title **TREASURER**

Name BELTRAMI, NATALIE Name RABIEGA, CHRISTINE M Address 305 VAILL POINT ROAD

Address 37205 HARBOUR VISTA CIRCLE

SAINT AUGUSTINE FL 32086 City-State-Zip: City-State-Zip: SAINT AUGUSTINE FL 32080

\/P Title

Name SIMS, JANE

126 LAKE OF THE WOODS #204 Address

JACKSONVILLE FL 32259 City-State-Zip:

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 M. RABIEGA

Electronic Signature of Signing Officer/Director Detail

TREASURER

05/09/2019