

F06000003705

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

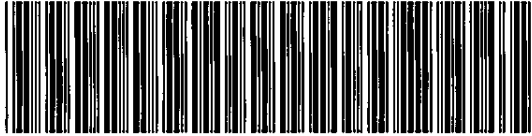
(Business Entity Name)

(Document Number)

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2006 MAY 22 PM 2:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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web-23727

06 MAY 22 PM 2:37
RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2 Bush MAY 25 2006

CONFIDENTIAL DIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: ED

DATE: 05/22/06

REF. #: 0319.52335

CORP. NAME: LC PASTORAL SERVICES INC.

- | | | |
|---|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input checked="" type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 010507 FOR \$ 70.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

COST LIMIT: \$ _____

PLEASE RETURN:

- | | | |
|--|---|--|
| <input type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input checked="" type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 23, 2006

CORPDIRECT INC.

SUBJECT: LC PASTORAL SERVICES, INC.
Ref. Number: W06000023727

PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE.

We have received your document for LC PASTORAL SERVICES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Foreign Profit Corporation, but your entity is a Foreign Non-Profit Corporation. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch
Document Specialist

Letter Number: 006A00036129

PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE.

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06 MAY 24 AM 9:36
DIVISION OF CORPORATIONS
PLEASE GIVE ORIGINAL SUBMISSION
DATE AS FILE DATE.

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. LC Pastoral Services, Inc.

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

2. New York 3. 06-1540230
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 02/22/1999 5. Perpetual
(Date of Incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. N/A
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 590 Columbus Avenue, Thornwood. NY 10594
(Principal office address)

590 Columbus Avenue, Thornwood. NY 10594
(Current mailing address)

8. Ministry with Families, youth nad adults throughout the country. Operation of residence of Priest and Brothers.
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: CorpDirect Agents, Inc.

Office Address: 515 East Park Avenue

Tallahassee, Florida 32301
(City) (Zip Code)

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TALLAHASSEE, FLORIDA

10. **Registered agent's acceptance:**
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Scott Reilly

Address: 7215 Northgreen Drive NE
Atlanta, GA 30328

Vice Chairman: Robert Sloan

Address: 2595 Spalding Drive
Atlanta, GA 30350

Director: Jose F. Ortega

Address: 582 Columbus Avenue
Thornwood, NY 10594

Director: Peter Devereux

Address: 2595 Spalding Drive
Atlanta, GA 30350

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TALLAHASSEE, FLORIDA

B. OFFICERS

President: Scott Reilly

Address: 7215 Northgreen Drive NE
Atlanta, GA 30328

Vice President: Robert Sloan

Address: 2595 Spalding Drive
Atlanta, GA 30350

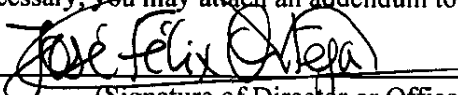
Secretary: Jose F. Ortega

Address: 582 Columbus Avenue

Treasurer: Jose F. Ortega

Address: 582 Columbus Avenue

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. 
(Signature of Director or Officer listed in number 12 of the application)

14. Jose F. Ortega - Secretary/Treasurer
(Typed or printed name and capacity of person signing application)



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown
Secretary of State

2006 MAY 22 PM 2:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

The Office of the Secretary of State of the State of Rhode Island and Providence Plantations, HEREBY CERTIFIES, that

LC PASTORAL SERVICES INC.

a Rhode Island non-profit corporation, filed articles of incorporation in this office on the 22nd day of February, 1999; and

IT IS FURTHER CERTIFIED that as of this date said non-profit corporation is duly organized and existing under and by virtue of the laws of the State of Rhode Island and is in good standing according to the records of this office.

SIGNED AND SEALED this first day of May, A.D. 2006.

Secretary of State

BY

SIGNED AND SEALED this first day of

IT IS FURTHER CERTIFIED that as of this date said non-profit corporation is duly organized and existing under and by virtue of the laws of the State of Rhode Island and is in good standing according to the records of this office.

