

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000001983

FILED
Apr 14, 2011
Secretary of State

Entity Name: THE CATHOLIC MUTUAL RELIEF SOCIETY OF AMERICA, INC.

Current Principal Place of Business:

10843 OLD MILL ROAD
OMAHA, NE 681542600

New Principal Place of Business:

Current Mailing Address:

10843 OLD MILL ROAD
OMAHA, NE 681542600

New Mailing Address:

FEI Number: 47-0400508

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: CT
Name: LUCAS, GEORGE J
Address: 100 N. 62ND STREET
City-St-Zip: OMAHA, NE 68132

Title: VT
Name: SHEEHAN, MICHAEL J
Address: 4000 ST. JOSEPH'S PLACE, NW
City-St-Zip: ALBUQUERQUE, NM 87120

Title: T
Name: KINNEY, JOHN F
Address: 214 3RD AVENUE SOUTH
City-St-Zip: ST CLOUD, MN 563014402

Title: VT
Name: RICKEN, DAVID L
Address: 1910 S WEBSTER AVENUE
City-St-Zip: GREEN BAY, WI 543012256

Title: P
Name: BEVERIDGE, JOSEPH T
Address: 10843 OLD MILL ROAD
City-St-Zip: OMAHA, NE 681542600

Title: T
Name: BROM, ROBERT H
Address: 3888 PADUCAH DRIVE
City-St-Zip: SAN DIEGO, CA 921175349

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: JOSEPH T. BEVERIDGE

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04/14/2011

Electronic Signature of Signing Officer or Director

Date