

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 09, 2004 8:00 am**  
**Secretary of State**

04-09-2004 90050 042 \*\*\*\*61.25

**DOCUMENT # N02000002159**

1. Entity Name

OUR LADY OF FATIMA SEMINARIAN FUND, INC.



Principal Place of Business

Mailing Address

28290 BEAUMONT RD  
 BONITA SPRINGS FL 34134

4107 DAHOON HOLLY CT  
 BONITA SPRINGS FL 34134

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE CR2E037 (11/03)

4. FEI Number

45-0473741

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RUEGG, JOHN  
 4107 DAHOON HOLLY CT  
 BONITA SPRINGS FL 34134

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2004**

9. Election Campaign Financing Trust Fund Contribution.

**\$5.00** May Be Added to Fees

**Make Check Payable to Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  Delete  
 NAME METZGER, WILLIAM  
 STREET ADDRESS 2122 JACARANDA CT  
 CITY-ST-ZIP NAPLES FL 34110

TITLE SECRETARY  Change  Addition  
 NAME LEO MAC DONALD  
 STREET ADDRESS 25071 GOLDCREST DR  
 CITY-ST-ZIP BONITA SPRINGS FL 34134

TITLE VPD  Delete  
 NAME CULLY, JAMES  
 STREET ADDRESS 15287 BURNABY DRIVE  
 CITY-ST-ZIP NAPLES FL 34110

TITLE DIRECTOR  Change  Addition  
 NAME BRUCE G. FEDOR  
 STREET ADDRESS 28171 WINTHROP CIRCLE  
 CITY-ST-ZIP BONITA SPRINGS, FL 34134

TITLE TD  Delete  
 NAME RUEGG, JACK  
 STREET ADDRESS 4107 DAHOON HOLLY CT  
 CITY-ST-ZIP BONITA SPRINGS FL 34134

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE D  Delete  
 NAME ZUCCARO, P.J.  
 STREET ADDRESS 9850 ORTEGA LANE  
 CITY-ST-ZIP BONITA SPRINGS FL 34135

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE D  Delete  
 NAME MACDONALD, LEO  
 STREET ADDRESS 25071 GOLDCREST DR  
 CITY-ST-ZIP BONITA SPRINGS FL 34134

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *William Metzger*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/29/04

239-514-0705

Date Daytime Phone #