

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
May 15, 2006  
Secretary of State**

DOCUMENT# N04000008100

**Entity Name:** AUGUSTINIAN MONKS OF THE PRIMITIVE OBSERVANCE, INCORPORATED

**Current Principal Place of Business:**

2075 MERCERS FERNERY RD  
DELAND, FL 32720

**New Principal Place of Business:**

**Current Mailing Address:**

2075 MERCERS FERNERY RD  
DELAND, FL 32720

**New Mailing Address:**

**FEI Number:** 04-3072770      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

KUEBLER, S. SEAMUS REV.  
2075 MERCERS FERNERY RD  
DELAND, FL 32720 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: P ( ) Delete  
Name: KUEBLER, A. SEAMUS REV.  
Address: 2075 MERCERS FERNERY RD  
City-St-Zip: DELAND, FL 32720

Title: ST ( ) Delete  
Name: DROUIN, NICHOLAS BRO.  
Address: 2075 MERCERS FERNERY RD  
City-St-Zip: DELAND, FL 32720

Title: D ( ) Delete  
Name: GRIMALDO, JOSEPH CPA-ADV  
Address: 446 MAIN ST.  
City-St-Zip: WORCESTER, MA 01608

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: A. SEAMUS KUEBLER

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

RE..

05/15/2006

\_\_\_\_\_  
Date