

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11395

FILED  
Jan 07, 2009  
Secretary of State

Entity Name: REDEMPTORIST FATHERS OF FLORIDA, INC.

**Current Principal Place of Business:**

313 HILLMAN ST.  
NEW SMYRNA BEACH, FL 32170

**New Principal Place of Business:**

313 HILLMAN ST.  
NEW SMYRNA BEACH, FL 32168

**Current Mailing Address:**

313 HILLMAN ST.  
P O BOX 1529  
NEW SMYRNA BEACH, FL 32170

**New Mailing Address:**

FEI Number: 13-1635280      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

ROSS, WILLIAM L JR  
221 NORTH CAUSEWAY  
NEW SMYRNA BEACH, FL 32069      US

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

RODRIGUEZ, LUZ E  
313 HILLMAN STREET  
NEW SMYRNA BEACH, FL 32168      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: LUZ E. RODRIGUEZ

01/07/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: S/D ( ) Delete  
Name: SOUSA, PETER  
Address: 313 HILLMAN STREET  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: T/D ( ) Delete  
Name: PARKER, GLENN  
Address: 313 HILLMAN ST.  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: V/D ( ) Delete  
Name: CHAVARRIA, JEROME  
Address: 313 HILLMAN ST.  
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: T/D ( ) Delete  
Name: KNAPP, GERARD  
Address: 7509 SHORE RD.  
City-St-Zip: BROOKLYN, NY

Title: S/D ( ) Delete  
Name: PARKER, GLENN  
Address: 313 HILLMAN ST.  
City-St-Zip: NEW SMYRNA BEACH, FL

Title: P ( ) Delete  
Name: WOODS, PATRICK  
Address: 7509 SHORE RD.  
City-St-Zip: BROOKLYN, NY

**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:

Title: T/D (X) Change ( ) Addition  
Name: FALISKIE, EDMUND  
Address: 7509 SHORE RD.  
City-St-Zip: BROOKLYN, NY

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

Title: P (X) Change ( ) Addition  
Name: WOODS, PATRICK  
Address: 7509 SHORE RD.  
City-St-Zip: BROOKLYN, NY 11209

I hereby certify that the information supplied with this filing does not qualify 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: JEROME CHAVARRIA

V/D

01/07/2009

Electronic Signature of Signing Officer or Director

Date