

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90757 006 ****70.00

DOCUMENT # N24228			
1. Entity Name SHRINE OF FATIMA AND SAINT CAJETAN, INC.			
Principal Place of Business 10360 ATLANTA AVE. BROOKSVILLE, FL 34614 US		Mailing Address 10455 ATLANTA AVE BROOKSVILLE, FL 34614 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

14017596



04282004 Chg-NP CR2E037 (10/03)

4. FEI Number
59-2865136 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	
GOTTLIEB & GOTTLIEB P.A. 2475 ENTERPRISES RD. STE. #100 CLEARWATER, FL 33763		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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing 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	TD	<input checked="" type="checkbox"/> Delete	TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FITZSIMMONS, EDNA		NAME	Fitzsimmons, Edna	
STREET ADDRESS	1908 LENNOX ROAD EAST		STREET ADDRESS	9470 Wakoma Way	
CITY-ST-ZIP	PALM HARBOR, FL 34683		CITY-ST-ZIP	Weschi, Weesee FL 34613	
TITLE	DT	<input checked="" type="checkbox"/> Delete	TITLE	Director & Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WRIGHT, JAMES M REV.		NAME	Wright, James M Rev Father	
STREET ADDRESS	10455 ATLANTA AVE		STREET ADDRESS	10455 Atlanta Ave	
CITY-ST-ZIP	BROOKSVILLE, FL 34614		CITY-ST-ZIP	Brooksville FL 34614	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ARROLA, ANNA MARIA		NAME	Arrola, Anna Maria	
STREET ADDRESS	1165 MIRAGE AVE		STREET ADDRESS	1165 Mirage Ave	
CITY-ST-ZIP	BROOKSVILLE, FL 34614		CITY-ST-ZIP	Brooksville Fl. 34614	
TITLE	CS	<input checked="" type="checkbox"/> Delete	TITLE	Chairman & Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VANNI, CLAUDETTE		NAME	Vanni, Claudette	
STREET ADDRESS	12272 EAKIN ST		STREET ADDRESS	12272 Eakin St	
CITY-ST-ZIP	BROOKSVILLE, FL 34614		CITY-ST-ZIP	Brooksville FL 34614	
TITLE	T	<input type="checkbox"/> Delete	TITLE	Trustee	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHNEIDER, DIANE		NAME	Schneider, Diane	
STREET ADDRESS	10059 BEDFORD ROAD		STREET ADDRESS	10059 Bedford Road	
CITY-ST-ZIP	SPRING HILL, FL 34608		CITY-ST-ZIP	Spring Hill FL 34608	
TITLE	T	<input type="checkbox"/> Delete	TITLE	Trustee	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DONAIRE, SUSANA T MDPA		NAME	Donaire, Susana MD PA	
STREET ADDRESS	730 SE 5TH TERRACE		STREET ADDRESS	730 SE 5TH Terrace	
CITY-ST-ZIP	CRYSTAL RIVER, FL 34429		CITY-ST-ZIP	Crystal River FL 34429	

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 *Claudette Vanni* CLAUDETTE VANNI Chairman & Secretary
 4/28/04