

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Jan 19, 2009  
Secretary of State

DOCUMENT# N39111

Entity Name: MAGNIFICAT, INC., TAMPA CHAPTER OF THE DIOCESE OF ST. PETERSBURG, FLORIDA

## Current Principal Place of Business:

C/O ELEANOR GONZALEZ  
3301 BAYSHORE BLVD #1004 D  
TAMPA, FL 33629

## New Principal Place of Business:

## Current Mailing Address:

C/O ELEANOR GONZALEZ  
3301 BAYSHORE BLVD #1004 D  
TAMPA, FL 33629

## New Mailing Address:

FEI Number: 59-3074611      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GONZALEZ, ELEANOR  
3301 BAYSHORE BLVD #1004 D  
TAMPA, FL 33629      US

## Name and Address of New Registered Agent:

GONZALEZ, ELEANOR DIRECTO  
3301 BAYSHORE BLVD #1004 D  
TAMPA, FL 33629      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: ELEANOR GONZALEZ      01/19/2009  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

## OFFICERS AND DIRECTORS:

Title: S      ( ) Delete  
Name: RODRIQUEZ, YVONNE  
Address: 8003 LAGO VISTA DR  
City-St-Zip: TAMPA, FL 33614

Title: D      ( ) Delete  
Name: PRISLAND, KAREN  
Address: 307 BEN AVON DRIVEF  
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: D      ( ) Delete  
Name: GONZALEZ, ELEANOR  
Address: 3301 BAYSHORE BLVD #1004-D  
City-St-Zip: TAMPA, FL 33629

Title: T      ( ) Delete  
Name: PLAZAK, PAM  
Address: 18542 OTTERWOOD AVE  
City-St-Zip: TAMPA, FL 33647

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SECR      (X) Change ( ) Addition  
Name: RODRIQUEZ, YVONNE  
Address: 8003 LAGO VISTA DR  
City-St-Zip: TAMPA, FL 33614

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 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: ELEANOR GONZALEZ      DIRE      01/19/2009  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date