2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 09, 2005
Secretary of State

DOCUMENT# N94000000982

Entity Name: PAX CATHOLIC COMMUNICATIONS, INC.

Current Principal Place of Business:

1779 NW 28 ST.
SUITE 1
MIAMI, FL 33142 US

New Principal Place of Business:

Current Mailing Address:

1779 NW 28 ST.
SUITE 1
MIAMI, FL 33172 US

New Mailing Address:

FEI Number: 65-0478741 **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:

FITZGERALD, J. PATRICK
110 MERRICK WAY
SUITE 2-C
CORAL GABLES, FL 33134 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:	D	( ) Delete
Name:	FAVALORA, MOST REV. JOHN	
Address:	9401 BISCAYNE BLVD.	
City-St-Zip:	MIAMI SHORES, FL 33138	
Title:	DP	( ) Delete
Name:	HERNANDO, JOSE L REV.	
Address:	1779 NW 28TH ST	
City-St-Zip:	MIAMI, FL 33142	
Title:	DS	( ) Delete
Name:	HENNESSEY, REV WILLIAM	
Address:	9401 BISCAYNE BLVD	
City-St-Zip:	MIAMI SHORES, FL 33180	
Title:	DT	( ) Delete
Name:	VAUGHAN, JOHN REV	
Address:	9401 BISCAYNE BLVD.	
City-St-Zip:	MIAMI SHORES, FL 33180	
Title:	D	( ) Delete
Name:	CUTIE, ALBERTO REV.	
Address:	1779 NW 28TH STREET	
City-St-Zip:	MIAMI, FL 33142	

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:	( ) 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 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 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: ALBERTO CUTIE D 05/09/2005

Electronic Signature of Signing Officer or Director — Date