2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 10, 2005
Secretary of State

DOCUMENT# N98000000211

Entity Name: CATHOLIC CHARITIES LEGAL SERVICES, ARCHDIOCESE OF MIAMI, INC.

Current Principal Place of Business:

9401 BISCAYNE BOULEVARD
MIAMI, FL 33138

New Principal Place of Business:

Current Mailing Address:

9401 BISCAYNE BOULEVARD
MIAMI, FL 33138

New Mailing Address:

FEI Number: 65-0804650 **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 P ESQ
110 MERRICK WAY
SUITE 3-B
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, JOHN C REV	
Address:	9401 BISCAYNE BOULEVARD	
City-St-Zip:	MIAMI SHORES, FL 33138	
Title:	T	( ) Delete
Name:	FOX-ISICOFF, TAMMY ESQ	
Address:	1110 BRICKELL AVENUE, SUITE 210	
City-St-Zip:	MIAMI, FL 33131	
Title:	D	( ) Delete
Name:	GALLAGHER, LORETTA	
Address:	2685 MEADOW WOOD DRIVE	
City-St-Zip:	WESTON, FL 33332	
Title:	D	( ) Delete
Name:	GORNEWICZ, DAVID	
Address:	1144 N.W. 131 AVE	
City-St-Zip:	PEMBROKE PINES, FL 33028	
Title:	S	( ) Delete
Name:	HENNESSEY, WILLIAM J MSGR	
Address:	9401 BISCAYNE BOULEVARD	
City-St-Zip:	MIAMI SHORES, FL 33138	
Title:	D	( ) Delete
Name:	FERNANDO, HERIA REV	
Address:	8725 S.W. 32 STREET	
City-St-Zip:	MIAMI, FL 33161	

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:	
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: MSGR WILLIAM J HENNESSEY S 05/10/2005

Electronic Signature of Signing Officer or Director — Date