

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14674

FILED
Apr 27, 2005
Secretary of State

Entity Name: SOCIETY OF FRANCISCAN FATHERS OF GREENE, MAINE, INCORPORATED

Current Principal Place of Business:

FRANCISCAN MONASTERY
P.O. BOX 980
KENNEBUNKPORT, ME 040460980

New Principal Place of Business:

Current Mailing Address:

FRANCISCAN MONASTERY
P.O. BOX 980
KENNEBUNKPORT, ME 040460980

New Mailing Address:

FEI Number: 22-2288242

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRABNICKAS, ANTANAS
555 68TH AVENUE
ST. PETERSBURG BEACH, FL 33706 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: PD () Delete
Name: BARIUS, PLACIDUS,
Address: P.O. BOX 980 BEACH ST
City-St-Zip: KENEBUNKPORT, ME

Title: STD () Delete
Name: SAKALYS, RAPHAEL,
Address: P.O. BOX 980 BEACH ST
City-St-Zip: KENEBUNKPORT, ME

Title: D () Delete
Name: GRABNICKAS, ANTANAS
Address: 555 68TH AVENUE
City-St-Zip: SAINT PETERSBURG, FL 33706

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:

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: PLACIDUS BARIUS

PD

04/27/2005

Electronic Signature of Signing Officer or Director

Date