

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P32692

FILED
Jan 09, 2004
Secretary of State**Entity Name:** CATHOLIC LEGAL IMMIGRATION NETWORK, INC.**Current Principal Place of Business:**415 MICHIGAN AVENUE NE
SUITE 150
WASHINGTON, DC 20017**New Principal Place of Business:****Current Mailing Address:**415 MICHIGAN AVENUE NE
WASHINGTON, DC 20017**New Mailing Address:**415 MICHIGAN AVENUE NE
SUITE 150
WASHINGTON, DC 20017**FEI Number:** 52-1584951**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**SHELDON, JILL
3900 NW 79TH AVE
#564
MIAMI, FL 33166 US**Name and Address of New Registered Agent:**SHELDON, JILL
7300 BISCAYNE BLVD.
#304
MIAMI, FL 33138 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: JILL SHELDON

01/09/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** C () Delete
Name: DIMARZIO, NICHOLAS
Address: 631 MARKET STREET
City-St-Zip: CAMDEN, NJ 08102**Title:** VP () Delete
Name: TAMAYO, JAMES A
Address: 1901 CORPUS CHRISTI STREET
City-St-Zip: LAREDO, TX 78044**Title:** T () Delete
Name: OCHOA, ARMANDO X
Address: 499 ST MATTHEWS
City-St-Zip: EL PASO, TX 79907**Title:** C () Delete
Name: BELFORD, JANE G
Address: PO BOX 29260
City-St-Zip: WASHINGTON, DC 200170260**Title:** BOB () Delete
Name: DRISCOLL, MICHAEL P
Address: 303 FEDERAL HWY
City-St-Zip: BOISE, ID 83705**Title:** ED () Delete
Name: DUVALL, RAY M
Address: 349 CEDAR STREET
City-St-Zip: SAN DIEGO, CA 921013197**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: NICHOLAS DIMARZIO

BP.

01/09/2004

Electronic Signature of Signing Officer or Director

Date