

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 20 PM 2:20**

DOCUMENT # N93000001114 (8)

1. Corporation Name
SECULAR ORDER OF MARY, INC.

Principal Place of Business Mailing Address
13043 PARK BLVD. SEMINOLE FL 34646

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/03/1993	3a. Date of Last Report 02/28/1994
4. FEI Number 59-3174394	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input checked="" type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

9. Name and Address of Current Registered Agent
**GARNIER, ED
13043 PARK BLVD.
SEMINOLE FL 33706.**

10. Name and Address of New Registered Agent

B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City
B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *[Signature]* **ED P. GARNIER SD** DATE: **3-13-95**

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	USTICK, JOHN
STREET ADDRESS	7995 SHADOW RUN DR.
CITY-ST-ZIP	LARGO FL 34643
TITLE	D
NAME	USTICK, MARLA
STREET ADDRESS	7995 SHADOW RUN DRIVE
CITY-ST-ZIP	LARGO FL 34643
TITLE	TD
NAME	GARNIER, CHRIS
STREET ADDRESS	2804 FULTON ST. SW
CITY-ST-ZIP	LARGO FL 34644
TITLE	SD
NAME	GARNIER, ED
STREET ADDRESS	2804 FULTON ST. SW
CITY-ST-ZIP	LARGO FL 34644
TITLE	D
NAME	LEE, ROLAND
STREET ADDRESS	8791 15TH AVE. N
CITY-ST-ZIP	ST. PETERSBURG FL 33710
TITLE	D
NAME	LEE, PATRICIA
STREET ADDRESS	8791 15TH AVE. N
CITY-ST-ZIP	ST. PETERSBURG FL 33710

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	LEE, ROLAND	
1.3 STREET ADDRESS	8791 15TH AVE N	
1.4 CITY-ST-ZIP	ST. PETERSBURG, FL 33710	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	D. USTICK, JOHN	
5.3 STREET ADDRESS	7995 SHADOW RUN DR	
5.4 CITY-ST-ZIP	LARGO, FL 34643	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: *[Signature]* **ED P. GARNIER, Sec'y SD** DATE: **3-13-95 (813) 578-4821**