2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001114

FILED Jun 02, 2006 Secretary of State

Entity Name: SECULAR ORDER OF JESUS, MARY AND JOSEPH INC.

Current Principal Place of Business: New Principal Place of Business: 634 WHISPER RIDGE LOOP DAVENPORT, FL 33897 **Current Mailing Address: New Mailing Address:** 7552 EAGLES FLIGHT LANE FORT MYERS, FL 33912 FEI Number: 59-3174394 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: Name and Address of New Registered Agent: RANEY, WILLIAM O JMJ 7552 EAGLES FLIGHT LANE FORT MYERS, FL 33912 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition SMITH, RICHARD JMJ Name: Name: 28 SUSQUEHANNA CT Address: Address: City-St-Zip: BREVARD, NC 28717 City-St-Zip: Title: SD () Delete Title: () Change () Addition Name: MEYER, JEROME JMJ Name: Address: 2322 WEST RUSSEL RD Address: City-St-Zip: SYDNEY, OH 45365 City-St-Zip: Title: () Delete Title: () Change () Addition RANEY, WILLIAM Name: Name: 7552 EAGLE FLIGHT LANE Address: Address: City-St-Zip: FORT MYERS, FL 33912 City-St-Zip: Title: () Delete Title: () Change () Addition M Name: RANEY, BARBARA Name: 7552 EAGLE FLIGHT LANE Address: Address: City-St-Zip: FORT MYERS, FL 33912 City-St-Zip: Title: () Delete Title: () Change () Addition HUEY, CHERYLEE JMJ Name: Name: 220 MAPLE DRIVE Address: Address: City-St-Zip: BREVARD, NC 28712 City-St-Zip: Title: () Delete Title: () Change () Addition MIDDLETON, GAIL JMJ Name: Name: Address: 120 KANASGOWA DR. Address: BREVARD, NC 28712 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: WILLIAM O. RANEY T 06/02/2006