

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 15, 2011
Secretary of State

DOCUMENT# 714791

Entity Name: CATHOLIC CHARITIES OF CENTRAL FLORIDA, INC.**Current Principal Place of Business:**1819 N. SEMORAN BLVD
ORLANDO, FL 32807**New Principal Place of Business:****Current Mailing Address:**1819 N. SEMORAN BLVD
ORLANDO, FL 32807**New Mailing Address:****FEI Number:** 59-1214353**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**NELSON, ARNE J
1819 N. SEMORAN BLVD
ORLANDO, FL 32807 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: VPD
Name: METCALF, DOUGLAS S MR.
Address: 405 VIRGINIA DRIVE
City-St-Zip: WINTER PARK, FL 32789

Title: PD
Name: GARDNER, CHRIS MR.
Address: 400 W. MORSE BLVD SUITE 101
City-St-Zip: WINTER PARK, FL 32789

Title: D
Name: GILARDI, PAMELA
Address: 105 DUE EAST AVENUE H
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: D
Name: FOX, MARY ANN MS.
Address: 100 MAGNOLIA OAK CIRCLE
City-St-Zip: LONGWOOD, FL 32779

Title: S
Name: KUNCIS, JIM MR.
Address: 3855 TUCKS POINT
City-St-Zip: WINTER PARK, FL 32792

Title: T
Name: AGUILAR, JOSHUA
Address: 108 SALT CREEK DRIVE
City-St-Zip: POINTE VEDRA, FL 32082

I hereby 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 all other like empowered.

SIGNATURE: ARNE NELSON

PRES

07/15/2011

Electronic Signature of Signing Officer or Director

Date