

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 701989

**FILED**  
**Apr 15, 2014**  
**Secretary of State**  
**CC8279087724**

**Entity Name:** DIOCESE OF CENTRAL FLORIDA, INCORPORATED

**Current Principal Place of Business:**

1017 EAST ROBINSON ST.  
ORLANDO, FL 32801-2023

**Current Mailing Address:**

1017 EAST ROBINSON ST.  
ORLANDO, FL 32801-2023 US

**FEI Number:** 59-6168979

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

NUNEZ, TIMOTHY C  
1017 EAST ROBINSON ST  
ORLANDO, FL 32801-2023 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:** TIMOTHY C NUNEZ

04/15/2014

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	P/D
Name	BREWER, GREGORY O
Address	1216 BUCKWOOD DR
City-State-Zip:	ORLANDO FL 32806
Title	S
Name	LANG, MARILYN
Address	%1017 EAST ROBINSON ST
City-State-Zip:	ORLANDO FL 32801-2023
Title	AS
Name	BENNETT, ERNEST L
Address	2442 HUNTINGDALE LANE
City-State-Zip:	OVIEDO FL 32765

Title	V/D
Name	WOOTEN, COUNCIL JR
Address	236 SOUTH LUCERNE AVE
City-State-Zip:	ORLANDO FL 32801-4499
Title	T/D
Name	BAUDER, BRUCE
Address	202 GREENLAKE CIR
City-State-Zip:	LONGWOOD FL 32779
Title	AT
Name	B, PICKETT L
Address	PO BOX 267
City-State-Zip:	GOLDENROD FL 32733-0267

*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:** GREGORY O BREWER

**PRESIDENT**

04/15/2014

Electronic Signature of Signing Officer/Director Detail

Date