

FILE NOW: FILING FEE IS \$61.25

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May 20 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # 701989 (6)  
1. Corporation Name  
DIOCESE OF CENTRAL FLORIDA, INCORPORATED



Principal Place of Business: 1017 E. ROBINSON ST. ORLANDO FL 32801  
Mailing Address: 1017 E. ROBINSON ST. ORLANDO FL 32801

3. Date Incorporated or Qualified: 02/06/1961  
4. FEI Number: 59-6168979  
Applied For: Not Applicable

2. Principal Place of Business (21-24) and Mailing Address (2a-26) details including City & State, Zip, and Country.

5. Certificate of Status Desired: \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees  
7. Is this nonprofit corporation a homeowners association? Yes No  
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent  
BENNETT, CANON ERNEST  
1017 EAST ROBINSON STREET  
ORLANDO FL 32801

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code: FL

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: Ernest C Bennett (Signature) May 12, 1998 (Date)  
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when relistating)

12. OFFICERS AND DIRECTORS

TITLE	PD	DELETE
NAME	HOWE, JOHN W.	
CITY-ST-ZIP	ORLANDO FL 32839	
TITLE	VD	DELETE
NAME	WOOTEN, COUNCIL JR	
STREET ADDRESS	236 SOUTH LUCERNE CIRCLE	
CITY-ST-ZIP	ORLANDO FL 32801	
TITLE	D	DELETE
NAME	BRYAN, DAVID	
STREET ADDRESS	2745 CANOE CREEK ROAD	
CITY-ST-ZIP	ST CLOUD FL	
TITLE	D	DELETE
NAME	GOSS, A J	
STREET ADDRESS	9841 SW HIGHWAY 484	
CITY-ST-ZIP	OCALA FL	
TITLE	S	DELETE
NAME	LANG, MARILYN	
STREET ADDRESS	1017 EAST ROBINSON STREET	
CITY-ST-ZIP	ORLANDO FL	
TITLE	T	DELETE
NAME	BAUDER, BRUCE	
STREET ADDRESS	202 GREENLAKE CIRCLE	
CITY-ST-ZIP	LONGWOOD FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] May 12, 1998

CP2E037 (10/97)