

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 14, 2009  
Secretary of State**

DOCUMENT# 703025

Entity Name: ST. JOHN VIANNEY COLLEGE SEMINARY, INC.

**Current Principal Place of Business:**

2900 SW 87 AVE  
MIAMI, FL 33165

**New Principal Place of Business:**

**Current Mailing Address:**

2900 SW 87 AVE  
MIAMI, FL 33165

**New Mailing Address:**

FEI Number: 59-0936099      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CARRUTHERS, REV MICHAEL  
2900 SW 87TH AVE  
MIAMI, FL 33165      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: CT      ( ) Delete  
Name: FAVALORA, JOHN C REV  
Address: 9401 BISCAYNE BOULEVARD  
City-St-Zip: MIAMI, FL 33138

Title: PD      ( ) Delete  
Name: CARRUTHERS, MICHAEL REV  
Address: 2900 SW 87TH AVE  
City-St-Zip: MIAMI, FL 33165

Title: T      ( ) Delete  
Name: ESTEVEZ, FELIPE  
Address: 9401 BISCAYNE BLVD.  
City-St-Zip: MIAMI, FL 33138

Title: S      ( ) Delete  
Name: HENNESSEY, V.G., WILLIAM J MSGR.  
Address: 9041 BISCAYNE BLVD.  
City-St-Zip: MIAMI SHORES, FL 33138

Title: T      ( ) Delete  
Name: NOONAN, JOHN REV.  
Address: 2900 S W 87 AVE  
City-St-Zip: MIAMI, FL 33165

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: REV MICHAEL CARRUTHERS

PRES

01/14/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date