2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Dec 08, 2005
Secretary of State

DOCUMENT# 714807

Entity Name: CATHOLIC CHARITIES, DIOCESE OF ST. PETERSBURG, INC.

Current Principal Place of Business:

1213 16TH STREET NORTH
ST PETERSBERG, FL 33705

New Principal Place of Business:

Current Mailing Address:

1213 16TH STREET NORTH
ST PETERSBERG, FL 33705

New Mailing Address:

FEI Number: 59-0875805 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DIVITO, JOSEPH
4514 CENTRAL AVENUE
ST PETERSBURG, FL 33711 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:	P	( ) Delete
Name:	MURPHY, FRANK V	
Address:	1213 16TH STREET NORTH	
City-St-Zip:	SAINT PETERSBURG, FL 33705 US	
Title:	S	( ) Delete
Name:	DWYER, SR. DOROTHY	
Address:	1213 16TH STREET NORTH	
City-St-Zip:	SAINT PETERSBURG, FL 33705	
Title:	V	( ) Delete
Name:	NEUHOFER, SR. MARY CLARE	
Address:	1213 16TH STREET NORTH	
City-St-Zip:	SAINT PETERSBURG, FL 33705	
Title:	T	( ) Delete
Name:	MURPHY, DAN	
Address:	1213 16TH STREET NORTH	
City-St-Zip:	SAINT PETERSBURG, FL 33705	

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:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: FRANK V. MURPHY P 12/08/2005

Electronic Signature of Signing Officer or Director — Date