

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 715962

FILED
Apr 01, 2009
Secretary of State

Entity Name: FLORIDA CATHOLIC CONFERENCE, INC.

Current Principal Place of Business:

201 W. PARK AVENUE
TALLAHASSEE, FL 323017760

New Principal Place of Business:

Current Mailing Address:

201 W. PARK AVENUE
TALLAHASSEE, FL 323017760

New Mailing Address:

FEI Number: 59-1232887

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCARRON, D MICHAEL
201 W. PARK AVENUE
TALLAHASSEE, FL 323017760 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: PD () Delete
Name: FAVALORA, JOHN C
Address: 9401 BISCAYNE BLVD.
City-St-Zip: MIAMI, FL 33138

Title: SD () Delete
Name: LYNCH, ROBERT N
Address: 6363 NINTH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33743

Title: D () Delete
Name: WENSKI, THOMAS
Address: 50 E. ROBINSON ST.
City-St-Zip: ORLANDO, FL 32801

Title: VD () Delete
Name: BARBARITO, GERALD M
Address: 9995 NORTH MILITARY TRAIL
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D () Delete
Name: GALEONE, VICTOR B
Address: 11625 OLD ST. AUGUSTINE RD.
City-St-Zip: JACKSONVILLE, FL 32258

Title: TD () Delete
Name: RICARD, JOHN H
Address: 11 NORTH B STREET
City-St-Zip: PENSACOLA, FL 32501

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: BARBARITO, GERALD M
Address: 9995 NORTH MILITARY TRAIL
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: SD (X) Change () Addition
Name: LYNCH, ROBERT N
Address: 6363 NINTH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33743

Title: TD (X) Change () Addition
Name: RICARD, JOHN H
Address: 11 NORTH B STREET
City-St-Zip: PENSACOLA, FL 32501

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

Title: D (X) Change () Addition
Name: WENSKI, THOMAS
Address: 50 E ROBINSON ST.
City-St-Zip: ORLANDO, FL 32801

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: ROBERT N. LYNCH

SD

04/01/2009

Electronic Signature of Signing Officer or Director

Date