2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#719107

FILED Apr 23, 2008 Secretary of State

Entity Name: THE ENDOWMENT FUND CORPORATION OF THE DIOCESE OF CENTRAL FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business: 1017 E. ROBINSON ST. ORLANDO, FL 328012023 US **Current Mailing Address: New Mailing Address:** 1017 E. ROBINSON ST ORLANDO, FL 328012023 US FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BENNETT, CANON ERNEST L BENNETT, ERNEST L 1017 EAST ROBINSON ST 1017 EAST ROBINSON ST ORLANDO, FL 328012023 US ORLANDO, FL 328012023 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: ERNEST L BENNETT 04/23/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: P/D () Delete () Change () Addition HOWE, JOHN W Name: Name: % 1017 EAST ROBINSON ST Address: Address: City-St-Zip: ORLANDO, FL 328012023 US City-St-Zip: Title: () Delete Title: () Change () Addition BAUDER, BRUCE Name: Name: Address: 201 E. PINE ST STE 550 Address: City-St-Zip: ORLANDO, FL 32801 US City-St-Zip: Title: () Delete Title: () Change () Addition WOOTEN, COUNCIL Name: Name: % 1017 EAST ROBINSON ST. Address: Address: City-St-Zip: ORLANDO, FL 328012023 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: BATES, THOMAS Name: % 1017 EAST ROBINSON ST. Address: Address: City-St-Zip: ORLANDO, FL 328012023 US City-St-Zip: Title: () Delete Title: () Change () Addition HUTCHINSON, BILLY Name: Name: % 1017 EAST ROBINSON ST. Address: Address: City-St-Zip: ORLANDO, FL 328012023 US 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: JOHN W HOWE P/D 04/23/2008