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Mar 04 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS**DOCUMENT # 724512 (9)**

1. Corporation Name

HOLY GHOST FATHERS, INC. THE

Principal Place of Business

12335 LAKEVIEW DR (DADE CITY)
P.O. BOX 2328
SAINT LEO FL 33574

Mailing Address

12335 LAKEVIEW DR (DADE CITY)
P.O. BOX 2328
SAINT LEO FL 33574-2328

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified

10/09/1972

3a. Date of Last Report

04/02/1996

4. FEI Number

23-7247882

Applied For

Not Applicable

5. Certificate of Status Desired

☐**\$8.75 Additional
Fee Required**6. Election Campaign Financing
Trust Fund Contribution☐**\$5.00 May Be
Added to Fees**8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HERNANDEZ, J.R.
12335 LAKEVIEW DR
DADE CITY FL 33525

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD
NAME KOREN, HENRY J.
STREET ADDRESS 12235 LAKEVIEW DR
CITY-ST-ZIP DADE CITY FL ☐ DELETETITLE SD
NAME VANDERPOEL, CORNELIUS
STREET ADDRESS 438 GOLDEN GATE POINT
CITY-ST-ZIP SARASOTA FL ☐ DELETETITLE F
NAME HERNANDEZ, J.R.(FISCAL)
STREET ADDRESS 12335 LAKEVIEW DR
CITY-ST-ZIP DADE CITY FL ☐ DELETETITLE D
NAME TIMMERMANS, FRANS
STREET ADDRESS RIDDERPLEIN 17
CITY-ST-ZIP GEMERT, NETHERLANDS ☐ DELETETITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETETITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Treasurer, Vice Pres, Dir ☒ Change ☐ Addition
1.2 NAME Koren, Henry J.
1.3 STREET ADDRESS 6230 Brush Run Road
1.4 CITY-ST-ZIP Berthel Park, PA 151022.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP4.1 TITLE President, Director ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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:

J. R. Hernandez

February 20, 1997

Date

Daytime Phone # 0046766

CR2E037 (9/96)