## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

#### **DOCUMENT #729478**

1. Entity Name

MONSIGNOR BISHOP MANOR, INC.



Principal Place of Business

824 BORDERS CIRCLE ORLANDO, FL 32808

Mailing Address

11300 4TH ST N STE 200

SAINT PETERSBURG, FL 33716

### FILED Feb 05, 2007 08:00 AM Secretary of State



#### DO NOT WRITE IN THIS SPACE

01162007 No Chg-NP CR2E037 (4/06)

4. FEI Number
59-1678391

5. Certificate of Status Desired

\$8.75 Additional Fee Regulred

6. Name and Address of Current Registered Agent

PLEUS, ROBERT J., JR., ESQUIRE AKERMAN SENTERFITT 255 S ORANGE AVE ORLANDO, FL 32802

# DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  Signature, typed or printed name of registered agent and title if apphicable. (NOTE: Registered			Agent algnature	required when reinstating)	DATE
	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financ Trust Fund Contribution	oing	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PARKES, FATHER GREGORY 50 EAST ROBINSON STREET ORLANDO, FL 32802				000000621653 02/12/07-80025-016 61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD BLANCHETTE, MARILYN 50 EAST ROBINSON STREET ORLANDO, FL 32802				3E7 1E7 01 00023 010 01.20
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HILBRICH, GERALD F 421 EAST ROBINSON STREET ORLANDO, FL 32802			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD O'MALLEY, DEBORAH F 801 HASTINGS STREET ORLANDO, FL 32808			IN '	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				b) b = 600000 ~00	.,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	THE GREET THE STATE	or governor works	f u k	50 (030) (1) (030) (1) (030)	
	certify that the information supplied with this file	ling does not qualify for the exen	nntions con	tained in Chanter 119	Florida Statutes. I further certify that the information

12. I nereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

Gerald F. Hilbrigh

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