2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#734646

FILED May 16, 2006 Secretary of State

Entity Name: LEGION OF MARY OF MIAMI, INC.

Current Principal Place of Business: New Principal Place of Business:

129 ALMERIA AVENUE

CORAL GABLES, FL 33134 US

US

Current Mailing Address: New Mailing Address:

P.O. BOX 381752 MIAMI, FL 33238

FEI Number: 59-1994955 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STEELE, MARK W ANNIS, MARGARET

19281 HOLIDAY RD 5000 NE QUAYSIDE TERRACE MIAMI, FL 33157 US MIAMI, FL 33138 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: MARGARET ANNIS 05/16/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PD (X) Change () Addition

 Name:
 STEELE, MARK W
 Name:
 ANNIS, MARGARET

 Address:
 19281 HOLIDAY RD.
 Address:
 5000 NE QUAYSIDE TERRACE

City-St-Zip: MIAMI, FL 33157 City-St-Zip: MIAMI, FL 33138

Title: S () Delete Title: VP (X) Change () Addition

 Name:
 CHIN, MADGE
 Name:
 STEELE, MARGARET

 Address:
 95 NE 128 ST
 Address:
 19281 HOLIDAY ROAD

 City-St-Zip:
 MIAMI, FL 33161
 City-St-Zip:
 MIAMI, FL 33157

Title: T () Delete Title: () Change () Addition

 Name:
 BUCKLEY, BRIAN
 Name:

 Address:
 13627 SW 117 LANE
 Address:

 City-St-Zip:
 MIAMI, FL 33186
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 SOULLERE, RICHARD (R, EV.)
 Name:

 Address:
 P O BOX 221937
 Address:

 City-St-Zip:
 HOLLYWOOD, FL 33022
 City-St-Zip:

 Name:
 ANNIS, MARGARET
 Name:
 CHIN, MADGE

 Address:
 379 NE 94 STREET
 Address:
 95 NE 128 STREET

 City-St-Zip:
 MIAMI, FL 33138
 City-St-Zip:
 MIAMI, FL 33161

I hereby certify that the information supplied with this filing does not qualify for the 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: BRIAN BUCKLEY T 05/16/2006