2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738594

FILED Jaņ 0<u>8, 2</u>008 Secretary of State

Entity Name: CATHOLIC CHARITIES BUREAU, INC. **Current Principal Place of Business: New Principal Place of Business:** 134 E. CHURCH STREET JACKSONVILLE, FL 32202 **Current Mailing Address: New Mailing Address:** 134 E. CHURCH STREET JACKSONVILLE, FL 32202 FEI Number: 59-0862770 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: BEITZ, WILLIAM BEITZ, WILLIAM C 134 E CHURCH ST 134 E CHURCH ST JACKSONVILLE, FL 32202 JACKSONVILLE, FL 32202 US 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: WILLIAM C. BEITZ 01/08/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition GALEONE, VICTOR Name: Name: 11625 ST. AUGUSTINE RD. Address: Address: City-St-Zip: JACKSONVILLE, FL 32258 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: KELLEY, MAUREEN Name: KELLEY, MAUREEN Address: 11625 OLD ST. AUGUSTINE RD. Address: 2918 LAKE SHORE BLVD. City-St-Zip: JACKSONVILLE, FL 32258 City-St-Zip: JACKSONVILLE, FL 32210 Title: () Delete Title: () Change () Addition BEITZ, WILLIAM Name: Name: Address: 134 E CHURCH ST Address: City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: Title: () Delete Title: () Change () Addition ALLEN, MARK Name: Name: 7882 HEATHER LAKE COURT. E. Address: Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: Title: () Delete Title: () Change () Addition CRAFT, DENNIS Name: Name: 316 ROYAL TERN RD, S. Address: Address: PONTE VEDRA BEACH, FL 32082 City-St-Zip: 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: WILLIAM C. BEITZ CEO 01/08/2008