FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	1998 DIVISION OF CORPORATIONS		Secretary of State	
DOCUMENT # 740908 (9)				J Scoretary or State
THE CATHEDRAL OF JESUS OF NAZARETH, INC.				
				. 1886 (F. 1887) 8101 8110 1886 1887 1887 1887 8101 8101 8101 8101 8101
Principal Place of Business Mailing Address				
14322 NORTH BOULEVARD 14322 NORTH BOULEVARD				
TAMPA FL 33613 - 2010 TAMPA FL 33613 720/			0	3. Date Incorporated or Qualified 11/29/1977
				4. FEI Number Applied For S9-2501243 Not Applied be
		2a. Mailing Address		5. Certificate of Status Desired \$8.75 Additional
21 26		Suite, Apt. #, etc.		Fee Required
22 27			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
City & Stat	te	City & State	-	7. Is this nonprofit corporation a homeowners association?
Zip	Country	28	Country	Yes ZN No 8. This corporation owes or has paid the current year Intangible
24	25	29 3	10	Personal Property Tax due June 30. Yes No
	Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New Registered Agent
LOBETO ELICENIO NI RISHOR				
14322 NORTH BOULEVARD			82 Street Addre	ess (P.O. Box Number is Not Acceptable)
TAMPA FL 33613 ~ 20) O			83	
			84 City	85 Zip Code
11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the abo			, the above-named corpo	oration submits this statement for the purpose of changing its registered
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		13.	ad when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	C	DELETE	1.1 NTLE	Change Addition
NAME	LORETO, EUGENIO N		1.2 NAME	
STREET ADDRESS	14322 N. BLVD.		1.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	TAMPA FL	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	Ohanna Address
NAME	MORALES, JESUSA P.	E.J. DESETE	2.1 TILE 2.2 NAME	Change Addition
STREET ADDRESS	13309 KREMERIA WAY		2.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL		2. 4 CITY - ST-ZIP	
TITLE	Ď	DELETE	3.1 TITLE	Change Addition
NAME	Braden, Normita		3.2 NAME	
STREET ADDRESS	802 ATTACHE COURT		3.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL		3.4, CITY-ST-ZIP	
TITLE	D	☐ DELETE	4.1 TITLE	Change Addition
NAME	LORETO, LOURDES U MD		4. 2 NAME	
STREET ADDRESS	4327 MIDDLE LAKE DR. TAMPA FL 33624		4.3 STREET ADDRESS	
CITY-ST-ZIP TITLE	T 33024	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	☐ Change ☐ Addition
NAME	BAUTISTA, PINKY L.	<u></u>	5.2 NAME	Change Addition
STREET ADDRESS	2089 JOEL COURT		5.3 STREET ADDRESS	
CITY-ST-ZIP	CLEARWATER FL		5.4 CITY-ST-ZIP	
TITLE	T	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	COSTALES, EUGENE M		6.2 NAME	
STREET ADDRESS	2939 E. HESTER ST.		6.3 STREET ADDRESS	ļ
CITY-ST-ZIP	INVERNESS FL 32650		6.4 CITY-ST-ZIP	

g does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information port is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an stee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in hanyaddress.

SIGNATURE:

FILED

Feb 04 1998 8:00am