FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Feb 15, 2001 8:00 am Secretary of State DOCUMENT # 740908 THE CATHEDRAL OF JESUS OF NAZARETH, INC. 02-15-2001 90087 021 ****75 00 Principal Place of Business Mailing Address 14322 NORTH BOULEVARD 14322 NORTH BOULEVARD TAMPA FL 33613-2010 TAMPA FL 33613-2010 2. Principal Place of Business 3. Mailing Address 14322 North Blvd. 14322 North Blvd. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Tampa, Florida City & State 4. FEI Number Applied For 59-2501243 Tampa, Florida Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 33613-2010 U.S.A. 33613-2010 U.S.A. Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) LORETO, EUGENIO N BISHOP 14322 NORTH BOULEVARD **TAMPA FL 33613** City Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW: Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State** FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITÍ E ☐ Delete TITLE ☐ Change ☐ Addition CR2E037 (10/00 LORETO, EUGENIO N NAME NAME STREET ADDRESS STREET ADDRESS 14322 N. BLVD. CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33613-2010 TITLE ☐ Delete Change ☐ Addition TITLE NAME MORALES, JESUSA P. NAME STREET ADDRESS 13309 KREMERIA WAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33626-2923 ☐ Change Addition → TITLE ... Delete ----TITLE -BRADEN, NORMITA NAME STREET ADDRESS **802 ATTACHE COURT** STREET ADDRESS CITY-ST-ZIP TAMPA FL CITY-ST-ZIP 33613 TITLE Delete ☐ Change ☐ Addition LORETO, LOURDES U MD NAME NAME 4327 MIDDLE LAKE DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33624** 33624-3406 TITLE Delete TITLE □ Change ☐ Addition NAME SCHUBERT, NANCY NAME STREET ADDRESS 3012 E. YUKON ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33604** TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME GALZOTE, MARY GRACE NAME STREET ADDRESS 10338 CARROLLWOOD LN #101 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. 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 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 impowered.

Phone #-813-960-0598 Phone #-813-960-0598

SHAND Bishop Eugenio N. Loreto / February 28,2001 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TAMPA FL 33618