2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Jun 14, 2006 8:00 am Secretary of State **DOCUMENT # 743530** 06-14-2006 90005 034 ****66.25 1. Entity Name CARDINAL MINDSZENTY SOCIETY OF FLORIDA, INC. Principal Place of Business Mailing Address **546 RUTH STREET** 546 RUTH STREET PORT ORANGE FL 32127 PORT ORANGE FL 32127 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For **NO-T APPLICABLE** Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HORVATH, MICHAEL J DR. Street Address (P.O. Box Number is Not Acceptable) 546 RUTH ST ... PORT ORANGE FL 32127 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed flame of registered agent and title if appacable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE \$ \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE Change Addition BARDOS, ANDREW . NAME NAME 107 WINDWARD WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP INDIAN HARBOUR BEACH FL CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition PAZMADY-HORVATH, MARGARE NAME NAME 546 RUTH ST. STREET ADDRESS STREET ADDRESS PORT ORANGE FL CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition HORVATH, MICHAEL J. NAME NAME STREET ADDRESS 546 RUTH ST. STREET ADDRESS CITY-ST-ZIP PORT ORANGE FL CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition GOMBOS, GEORGE NAME NAME STREET ADDRESS 942 LANTERND STREET ADDRESS CITY-ST-ZIP S. DAYTONA FL 32119 CITY-ST-ZiP ۵ TITLE ☐ Delete TITLE Change ☐ Addition PAPP, ALEX NAME MAME 4 OCEAN W BLVD #2068 STREET ADDRESS STREET ADDRESS DAYTONA BEACH SHORES FL 32118 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition IPOLYI, GEORGE NAME

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

6 MONTAUK CT

PALM COAST FL 32164

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: Dr. Luichael J. HORVATH, ENJ. Horvalle J. 2006 386-767-429

STREET ADDRESS

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