

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000774

FILED
Mar 10, 2009
Secretary of State

Entity Name: UNITED STATES CONFERENCE OF CATHOLIC BISHOPS, INC.

Current Principal Place of Business:

3211 FOURTH STREET, N.E.
WASHINGTON, DC 200171194

New Principal Place of Business:

Current Mailing Address:

3211 FOURTH STREET, N.E.
WASHINGTON, DC 200171194

New Mailing Address:

FEI Number: 53-0196617

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CUESTA, ERNESTO
1914 NW 84TH AVE.
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GEORGE, FRANCIS E
Address: PO BOX 1979
City-St-Zip: CHICAGO, IL 60690

Title: VP () Delete
Name: KICANAS, GERALD
Address: 111 S. CHURCH STREET, PO BOX 31
City-St-Zip: TUCSON, AZ 85702

Title: T () Delete
Name: SCHNURR, DENNIS M.
Address: 2830 E. 4TH STREET
City-St-Zip: DULUTH, MN 55812

Title: S () Delete
Name: MURRY, GEORGE V
Address: 144 W. WOOD STREET
City-St-Zip: YOUNGSTOWN, OH 44503

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: SCHNURR, DENNIS M.
Address: 100 EAST EIGHT STREET
City-St-Zip: CINCINNATI, OH 45202

Title: () Change () Addition
Name:
Address:
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: CARLOS ORTIZ MIRANDA

ESQ

03/10/2009

Electronic Signature of Signing Officer or Director

Date