

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2007 8:00 am
Secretary of State

01-16-2007 90216 044 ****61.25

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1. Entity Name
CATHOLIC FOREIGN MISSION SOCIETY OF AMERICA,
INC.



Principal Place of Business
PO BOX 306
MARYKNOLL, NY 10545-0306

Mailing Address
PO BOX 306
MARYKNOLL, NY 10545-0306

60001340



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01042007 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
13-1740144

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CARLETON, ROBERT J
2243 SARAGOSSA AVENUE
JACKSONVILLE, FL 32217

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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 name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
SIVALON, JOHN C
55 RYDER RD
MARYKNOLL, NY 10545 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AT
LAMAR, JOSEPH P.
77 RYDER ROAD
MARYKNOLL, NY 10545 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
MCGOURN, FRANCIS
55 RYDER RD
MARYKNOLL, NY 10545 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
FRIES, RICHARD R.
55 RYDER ROAD
MARYKNOLL, NY 10545 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
MCAULEY, JOHN J
55 RYDER RD
MARYKNOLL, NY 10545 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
CALLAHAN, RICHARD B.
77 RYDER RD
MARYKNOLL, NY ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BARTH, JOHN C
55 RYDER RD
MARYKNOLL, NY 10545 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
DAHL, SUSAN J
77 RYDER ROAD
MARYKNOLL, NY 10545 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 an other like empowered.

SIGNATURE:

Susan J. Dahl

Susan J. Dahl, Director

1/4/07

(914)941-7590

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #