2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000000950

FILED May 10, 2012 Secretary of State

Entity Name: OBLATE SHRINES AND RENEWAL CENTERS, INC.

Current Principal Place of Business: New Principal Place of Business:

391 MICHIGAN AVENUE, N.E. WASHINGTON, DC 20017

Current Mailing Address: New Mailing Address:

391 MICHIGAN AVE, N.E. WASHINGTON, DC 20017 US

FEI Number: 52-2133730 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US

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:

ANTONE, REV. WILLIAM OMI Name: Address: 391 MICHIGAN AVENUE, N.E. City-St-Zip: WASHINGTON, DC 20017

Title:

Name: STUDER, REV. LOUIS OMI Address: 391 MICHIGAN AVENUE, N.E. City-St-Zip: WASHINGTON, DC 20017

Title: STD

MAREK, REV. RAY JOHN OMI Name: Address: 391 MICHIGAN AVENUE, N.E. City-St-Zip: WASHINGTON, DC 20017

Title: ST

Name: GALLAGHER, REV. GREGORY OMI 391 MICHIGAN AVENUE, N.E. Address:

City-St-Zip: WASHINGTON, DC 20017

Title:

FLORES, REV. ARTHUR OMI Name: 327 OBLATE DRIVE Address: SAN ANTONIO, TX 78216 City-St-Zip:

Title:

JOHNSON, BRO, WILLIAM OMI Name: Address: 442 S. DEMAZENOD DRIVE BELLEVILLE, IL 62223 City-St-Zip:

I hereby 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 all other like empowered.

SIGNATURE: REV. RAY JOHN MAREK, OMI STD 05/10/2012