

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000292

FILED
Aug 08, 2005
Secretary of State

Entity Name: ST. CLAIRE MISSION, INC.

Current Principal Place of Business:

10476 SW 184 TR.
MIAMI, FL 33157 US

New Principal Place of Business:

12681 S. DIXIE HWY.
MIAMI, FL 33156 US

Current Mailing Address:

12681 S. DIXIE HWY.
PINECREST, FL 33156 US

New Mailing Address:

FEI Number: 65-0983376 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

JENNINGS, DESIREE M
7950 SW 131ST ST.
PINECREST, FL 33156 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: D () Delete
Name: JENNINGS, DESIREE M
Address: 7950 SW 131ST ST.
City-St-Zip: PINECREST, FL 33156

Title: D (X) Delete
Name: REDDEN, THOMAS L
Address: 18520 SW 200 STREET
City-St-Zip: MIAMI, FL 33187

Title: D () Delete
Name: YEISER, CHUCK
Address: 7001 SW 61ST AVE.
City-St-Zip: S. MIAMI, FL 33143

Title: S (X) Delete
Name: GOMEZ, GERARD F
Address: P.O. BOX 163636
City-St-Zip: MIAMI, FL 331163636

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DESIREE M JENNINGS

D

08/08/2005

Electronic Signature of Signing Officer or Director

Date