2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2006
Secretary of State

DOCUMENT# N00000002889

Entity Name: GUADALUPE CATHOLIC BOOKS AND GIFTS, INC.

Current Principal Place of Business:

1815-7 THOMASVILLE RD
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

1815-7 THOMASVILLE RD
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 59-3642015 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NUNEZ, CATHERINE
815 ABBIEGAIL DR
TALLAHASSEE, FL 32303 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: DST ( ) Delete
Name: MCGLYNN, KEVIN
Address: 2906 ABBOTSFORD RD
City-St-Zip: TALLAHASSEE, FL 32312

Title: DV ( ) Delete
Name: NIXON, MIKE
Address: 621 VONCILE AVE
City-St-Zip: TALLAHASSEE, FL 32303

Title: DP (X) Delete
Name: BUSCH, DAVE
Address: 3428 ROBINHOOD RD
City-St-Zip: TALLAHASSEE, FL 32312

Title: D ( ) Delete
Name: MANGAN, MICHAEL J
Address: 3807 SAMPSON COURT
City-St-Zip: TALLAHASSEE, FL 32312

Title: D (X) Delete
Name: COLAO, MANUEL
Address: 3209 BROOKFOREST DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DV (X) Change ( ) Addition
Name: MCGLYNN, KEVIN
Address: 2906 ABBOTSFORD RD
City-St-Zip: TALLAHASSEE, FL 32312

Title: D (X) Change ( ) Addition
Name: MANGAN, LYNN
Address: 3807 SAMPSON COURT
City-St-Zip: TALLAHASSEE, FL 32312

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

Title: DP (X) Change ( ) Addition
Name: MANGAN, MICHAEL J
Address: 3807 SAMPSON COURT
City-St-Zip: TALLAHASSEE, FL 32312

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 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: MICHAEL MANGAN DP 04/25/2006

Electronic Signature of Signing Officer or Director — Date