


2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

FILED
Jan 15, 2004 08:00 AM
Secretary of State

DOCUMENT # N00000006758		
1. Entity Name ARCHBISHOP COLEMAN F. CARROLL HIGH SCHOOL, INC.		
Principal Place of Business 10300 SW 167TH AVE MIAMI, FL 33196	Mailing Address 10300 SW 167TH AVE MIAMI, FL 33196	
DO NOT WRITE IN THIS SPACE		
		01082004 No Chg-NP CR2E037 (10/03)
		4. FEI Number 65-0787341 <input type="checkbox"/> Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required



01082004 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-0787341	<input type="checkbox"/> Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FITZGERALD, J PATRICK
110 MERRICK WAY, SUITE 3-B
CORAL GABLES, FL 33134

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IN THIS SPACE**

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, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DAVIS, MICHAEL W 10300 SW 167 AVE MIAMI, FL 33196
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FENCHAK, RICHARD J DR 10300 SW 167TH AVE MIAMI, FL 33196
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD VAUGHAN, JOHN J 9401 BISCAYNE BLVD MIAMI SHORES, FL 33138
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KELLY, VINCENT T REV 9401 BISCAYNE BLVD MIAMI SHORES, FL 33138
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HENNESSEY, WILLIAM J 9401 BISCAYNE BLVD MIAMI SHORES, FL 33138
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000005209
01/16/04-30006-002 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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 all other like empowered.

SIGNATURE: *Rev. Michael W. Davis* REV. MICHAEL W. DAVIS 01/09/04