

**2004 NOT-FOR-PROFIT CORPORATION
AMENDED ANNUAL REPORT**

Amended 10fz
FILED

04 JUN 11 AM 11:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



05282004 Chg-NP CR2E037 (10/03)

4. FEI Number 65-0787338 Applied For Not Applicable

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

DOCUMENT # N00000006763
1. Entity Name
ARCHBISHOP EDWARD A. MCCARTHY HIGH SCHOOL, INC.



Principal Place of Business 5451 S FLAMINGO RD FT LAUDERDALE, FL 33330
Mailing Address 5451 S FLAMINGO RD FT LAUDERDALE, FL 33330

2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country
3. Mailing Address Suite, Apt. #, etc. City & State Zip Country

6. Name and Address of Current Registered Agent
FITZGERALD, J. PATRICK
110 MERRICK WAY, SUITE 3-B
CORAL GABLES, FL 33134

7. Name and Address of New Registered Agent
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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Amended AR is \$61.25
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

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	WHYTE, EDMOND REV	
STREET ADDRESS	5451 S FLAMINGO RD	
CITY-ST-ZIP	FT LAUDERDALE, FL 33330	
TITLE	V	<input type="checkbox"/> Delete
NAME	PERHLA, RICHARD DR	
STREET ADDRESS	5451 S FLAMINGO RD	
CITY-ST-ZIP	FT LAUDERDALE, FL 33330	
TITLE	TD	<input type="checkbox"/> Delete
NAME	VAUGHAN, JOHN J REV	
STREET ADDRESS	9401 BISCAYNE BLVD	
CITY-ST-ZIP	MIAMI SHORES, FL 33138	
TITLE	SD	<input type="checkbox"/> Delete
NAME	KELLY, VINCENT T REV	
STREET ADDRESS	9401 BISCAYNE BLVD	
CITY-ST-ZIP	MIAMI SHORES, FL 33138	
TITLE	D	<input type="checkbox"/> Delete
NAME	HENNESSEY, WILLIAM J REV	
STREET ADDRESS	9401 BISCAYNE BLVD	
CITY-ST-ZIP	MIAMI SHORES, FL 33138	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DALTON, BRENDAN REV	
STREET ADDRESS	5451 S FLAMINGO RD	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33330	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

100037872631

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: Richard Perhla Richard Perhla, Director/v Date 6/2/04 Daytime Phone # 954 434-8820



CORPORATION SERVICE COMPANY

20f2

ACCOUNT NO. : 072100000032
REFERENCE : 739420 81624A
AUTHORIZATION : Patricia Pizutto
COST LIMIT : \$ 61.25

ORDER DATE : June 11, 2004
ORDER TIME : 10:12 AM
ORDER NO. : 739420-005
CUSTOMER NO: 81624A
CUSTOMER: Thomas Courtney, Esq
J. Patrick Fitzgerald, Pa
Suite 3-b
110 Merrick Way
Coral Gables, FL 33134

ANNUAL REPORT FILING

NAME: ARCHBISHOP EDWARD A. MCCARTHY
HIGH SCHOOL, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward-EXT#2935

EXAMINER'S INITIALS: _____

RECEIVED
04 JUN 11 AM 10:36
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA