

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007542

FILED
Apr 28, 2009
Secretary of State

Entity Name: ECCLESIASTICAL PROVINCE OF MIAMI, INC.

Current Principal Place of Business:

9401 BISCAYNE BOULEVARD
MIAMI SHORES, FL 33138

New Principal Place of Business:

Current Mailing Address:

9401 BISCAYNE BOULEVARD
MIAMI SHORES, FL 33138

New Mailing Address:

FEI Number: 03-0581040

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

J. PATRICK FITZGERALD, ESQUIRE
110 MERRICK WAY
SUITE 3-B
CORAL GABLES, FL 33134 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: PD () Delete
Name: TRUMPS, JEFF P
Address: 11 NORTH B STREET
City-St-Zip: PENSACOLA, FL 32501

Title: VD () Delete
Name: CATANIA, JOSEPH M
Address: 9401 BISCAYNE BOULEVARD
City-St-Zip: MIAMI SHORES, FL 33138

Title: T () Delete
Name: ZIGMONT, LAWRENCE
Address: 9401 BISCAYNE BOULEVARD
City-St-Zip: MIAMI SHORES, FL 33138

Title: SD () Delete
Name: MACINA, CATHERINE A
Address: 11625 OLD ST. AUGUSTINE ROAD
City-St-Zip: JACKSONVILLE, FL 32258

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HAMEL, DENIS A
Address: 9995 N. MILITARY TRAIL
City-St-Zip: PALM BEACH GARDENS, FL 33410

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 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: DENIS A. HAMEL

PD

04/28/2009

Electronic Signature of Signing Officer or Director

Date