

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Mar 21, 2005 08:00 AM
Secretary of State

DOCUMENT # N01322

1. Entity Name
CATHEDRAL CARAVAN, INCORPORATED



Principal Place of Business
790 LA PLAZA AVE S
ST. PETERSBURG, FL 33707 US

Mailing Address
790 LA PLAZA AVE S
ST. PETERSBURG, FL 33707 US



01132005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1154879	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

VAN KOEVERING, KAYE VAN
7234 1ST AVE S
ST. PETERSBURG, FL 33707

**DO NOT WRITE
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, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be**
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	T
NAME	WERKHEISER, PAUL
STREET ADDRESS	6633 HIBISCUS AVE S
CITY-ST-ZIP	SAINT PETERSBURG, FL 33707

TITLE	DP
NAME	VANKOEVERING, JOEY
STREET ADDRESS	7234 1ST AVENUE SOUTH
CITY-ST-ZIP	SAINT PETERSBURG, FL 33707

TITLE	VDS
NAME	VANKOEVERING, KAYE
STREET ADDRESS	7234 1ST AVENUE SOUTH
CITY-ST-ZIP	SAINT PETERSBURG, FL 33707

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/21/05-80031-002 61.25

**DO NOT WRITE
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:

Kaye VanKoeving

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/17/05

Date

(727)347-2463

Daytime Phone #