

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01322

FILED  
Jan 21, 2009  
Secretary of State

**Entity Name:** CATHEDRAL CARAVAN, INCORPORATED

**Current Principal Place of Business:**

4354 CENTRAL AVE  
SAINT PETERSBURG, FL 33713 US

**New Principal Place of Business:**

4354 1ST AVE N  
SAINT PETERSBURG, FL 33713 US

**Current Mailing Address:**

PO BOX 10475  
SAINT PETERSBURG, FL 33733 US

**New Mailing Address:**

**FEI Number:** 59-1154879      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

VAN KOEVERING, KAYE M MRS  
7234 1ST AVE S  
ST. PETERSBURG, FL 33707 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: T ( ) Delete  
Name: WERKHEISER, PAUL,  
Address: 6633 HIBISCUS AVE S  
City-St-Zip: SAINT PETERSBURG, FL 33707

Title: DP ( ) Delete  
Name: VANKOEVERTING, JOEY  
Address: 7234 1ST AVENUE SOUTH  
City-St-Zip: SAINT PETERSBURG, FL 33707

Title: VDS ( ) Delete  
Name: VANKOEVERTING, KAYE  
Address: 7234 1ST AVENUE SOUTH  
City-St-Zip: SAINT PETERSBURG, FL 33707

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: KAYE VANKOEVERTING

VDS

01/21/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date