## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000005151

FILED Jan 10, 2005 Secretary of State

Entity Name: HOLY SPIRIT ECUMENICAL CATHOLIC CHURCH, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

3925 ERNE STREET 10623 106TH AVE N

PALM HARBOR, FL 346831706 US LARGO, FL 337733939 US

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 15157

CLEARWATER, FL 337665157 US

FEI Number: 56-2368501 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ROSCZEWSKI, STEVEN M REV. 3925 ERNE STREET PALM HARBOR, FL 346831706 US

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:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete ASSELTA, ANTHONY SCIULLI, EUGENE G MR Name: Name:

6910 INTERBAY BLVD. #37 Address: 1208 ASTOR COMMONS PL #204 Address: TAMPA, FL 33616 BRANDON, FL 33511 US

City-St-Zip: City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

Name: ISACCO, JEANNE Name: COLLINS, MARY MS Address: 1847 BONITA WAY SOUTH Address: 5901 ESTES LN

City-St-Zip: ST. PETERSBURG, FL 33712 City-St-Zip: WESLEY CHAPEL, FL 33544 US

Title: () Delete Title: (X) Change ( ) Addition

GRINER, ROLLAND H MR COLLINS, MARY Name: Name: 5901 ESTES LANE Address: Address: 10401 CLIFF CIR City-St-Zip: WESLEY CHAPEL, FL 33544 City-St-Zip: TAMPA, FL 33612 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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

SIGNATURE: STEVEN M ROSCZEWSKI **REV** 01/10/2005

above, or on an attachment with an address, with all other like empowered.