

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03376

FILED
Feb 22, 2009
Secretary of State

Entity Name: THE DIOCESE OF THE SOUTH, INC.

Current Principal Place of Business:

2306 SE 20 CIRCLE
OCALA, FL 344718305 US

New Principal Place of Business:

Current Mailing Address:

2306 SE 20 CIR
OCALA, FL 344718305 US

New Mailing Address:

FEI Number: 59-2415182

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRIS, CHARLES E LTC
2306 SE 20 CIRCLE
OCALA, FL 34471 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: P () Delete
Name: HAVERLAND, PH.D, MARK
Address: 460 COBB ST
City-St-Zip: ATHENS, GA 30606

Title: VPD () Delete
Name: DANFORD, JAMES
Address: PO BOX 315
City-St-Zip: ARITON, AL 36311

Title: T () Delete
Name: SYBRANDT, KAREN
Address: 1060 VICTORIA CROSSING
City-St-Zip: WATKINSVILLE, GA 30677

Title: D () Delete
Name: WELLS, LAWRENCE K
Address: 2746 ST JOHN AVE
City-St-Zip: JACKSONVILLE, FL 32205

Title: D () Delete
Name: MORRIS, BONNIE J
Address: 2306 SE 20 CIRCLE
City-St-Zip: OCALA, FL 34471

Title: D () Delete
Name: ROGERS, MICHAEL
Address: 331 CELESTIAL LANE
City-St-Zip: HIXSON, TN 37343

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VPD (X) Change () Addition
Name: FANNING, TED M CDR
Address: 104 DAVIDJOHN COURT
City-St-Zip: GOOSE CREEK, SC 29445

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: WELLS, LAWRENCE K
Address: 2746 ST JOHN AVE
City-St-Zip: JACKSONVILLE, FL 32205

Title: D (X) Change () Addition
Name: VEVE, AMAND
Address: 14723 GAINESBOROUGH AVE.
City-St-Zip: ORLANDO, FL 32826

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: CHARLES E. MORRIS, LTC, USA, RETIRED

SCY

02/22/2009

Electronic Signature of Signing Officer or Director

Date