

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000002525

**FILED**  
**Feb 26, 2010**  
**Secretary of State**

**Entity Name:** HOLY NAME SOCIETY OF SAINT STEPHEN, INC.

**Current Principal Place of Business:**

521 DEER POINT CIRCLE  
GULF BREEZE, FL 32561

**New Principal Place of Business:**

**Current Mailing Address:**

6839 BRISAS WAY  
PENSACOLA, FL 32526

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

CALHOUN, STANLEY  
6839 BRISAS WAY  
PENSACOLA, FL 32526 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: DS  
Name: POLAKIEWICZ, WILLIAM  
Address: 2626 TINOSA CIRCLE  
City-St-Zip: PENSACOLA, FL 32526

Title: DV  
Name: CALHOUN, STANLEY HYLAND  
Address: 6839 BRISAS WAY  
City-St-Zip: PENSACOLA, FL 32526

Title: DT  
Name: HYLAND, RICHARD  
Address: 521 DEER POINT CIRCLE  
City-St-Zip: GULF BREEZE, FL 32561

Title: DP  
Name: CALLEWAERT, JOSEPH  
Address: 1348 GREEN VISTA LN  
City-St-Zip: GULF BREEZE, FL 32563

I hereby 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 all other like empowered.

SIGNATURE: RICHARD E. HYLAND

DT

02/26/2010

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

\_\_\_\_\_  
Date