## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000008597

FILED Jun 18, 2010 Secretary of State

Entity Name: CATHOLIC CHARITIES OF FLORIDA, INC.

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

201 WEST PAK AVE

TALLAHASSEE, FL 323017760

Current Mailing Address: New Mailing Address:

201 WEST PAK AVE TALLAHASSEE, FL 323017760

FEI Number: 55-0900157 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

FITZGERALD, J. PATRICK ESQ 110 MERRICK WAY STE 3-B CORAL GABLES, FL 33134 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:

Title: DP

Name: TURCOTTE, RICHARD PH.D.
Address: 9401 BISCAYNE BLVD
City-St-Zip: MIAMI, FL 33138

Title: DV

Name: MURPHY, FRANK Address: PO BOX 40200

City-St-Zip: ST. PETERSBURG, FL 33743

Title: D7

Name: ROUTSIS-ARROYO, PETER D

Address: PO BOX 2006

City-St-Zip: VENICE, FL 342842006

Title: DS

Name: HAMEL, DENIS A Address: PO BOX 109650

City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: [

Name: TIERNEY, WILLIAM J

Address: 11625 OLD ST AUGUSTINE ROAD City-St-Zip: JACKSONVILLE, FL 32258

Title: [

Name: NELSON, ARNE J Address: 1819 N. SEMORAN BLVD City-St-Zip: ORLANDO, FL 32807

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: ARNE J. NELSON D 06/18/2010