2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006
Secretary of State

DOCUMENT# N05000004524

Entity Name: BENEDICTINE SISTERS OF FLORIDA, INC.

Current Principal Place of Business:

33201 STATE HWY 52
ST LEO, FL 33574

New Principal Place of Business:

Current Mailing Address:

PO BOX 2450
ST LEO, FL 33574

New Mailing Address:

FEI Number: 59-0737887 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GREENFELDER, GLEN E
14217 THIRD ST
DADE CITY, FL 33523 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: NEUHOFER, MARY C
Address: 33201 STATE HWY 52
City-St-Zip: ST LEO, FL 33574

Title: V ( ) Delete
Name: ABBOTT, JEAN
Address: 33201 STATE HWY 52
City-St-Zip: ST LEO, FL 33574

Title: T ( ) Delete
Name: MARTINSON, JANE
Address: 33201 STATE HWY 52
City-St-Zip: ST LEO, FL 33574

Title: S ( ) Delete
Name: ERAZMUS, LISA-JUDENE
Address: 33201 STATE HWY 52
City-St-Zip: ST LEO, FL 33574

Title: D ( ) Delete
Name: HYDRO, MARY DAVID
Address: 33201 STATE HWY 52
City-St-Zip: ST LEO, FL 33574

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:

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 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: JEAN ABBOTT V 04/20/2006

Electronic Signature of Signing Officer or Director — Date