

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007614

FILED
Apr 28, 2008
Secretary of State

Entity Name: FRANCISCAN SISTERS OF MARY IMMACULATE, MOTHER OF THE CHURCH, INC.

Current Principal Place of Business:

1025 COMMONS CIRCLE
NAPLES, FL 34119

New Principal Place of Business:

27650 FRANKLIN STREET
BONITA SPRINGS, FL 34134

Current Mailing Address:

1025 COMMONS CIRCLE
NAPLES, FL 34119

New Mailing Address:

27650 FRANKLIN STREET
BONITA SPRINGS, FL 34134

FEI Number: 20-3203759

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAPLES-LAWDOCK, INC.
C/O QUARLES & BRADY LLP
1395 PANTHER LANE - SUITE 300
NAPLES, FL 34109 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: D () Delete
Name: WILSON, JESSICA MISS
Address: 1025 COMMONS CIRCLE
City-St-Zip: NAPLES, FL 34119

Title: D () Delete
Name: BOYLAN, TIMOTHY MR.
Address: 27650 FRANKLIN STREET
City-St-Zip: BONITA SPRINGS, FL 34134

Title: D () Delete
Name: BOYLAN, MAUREEN MRS.
Address: 27650 FRANKLIN STREET
City-St-Zip: BONITA SPRINGS, FL 34134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WILSON, JESSICA MISS
Address: 7708 E MCGREGOR RD
City-St-Zip: ROCKFORD, IL 61102

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 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: JESSICA WILSON

D

04/28/2008

Electronic Signature of Signing Officer or Director

Date