

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000805

FILED
Feb 25, 2009
Secretary of State

Entity Name: ST. ANNASTASIA ST. MARK CONFERENCE SOCIETY OF ST VINCENT DEPAUL,, INC.

Current Principal Place of Business:

407 SOUTH 33RD STREET
FT. PIERCE, FL 34947

New Principal Place of Business:

Current Mailing Address:

407 SOUTH 33RD STREET
FT. PIERCE, FL 34947

New Mailing Address:

FEI Number: 51-0591011

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PLUMMER, THOMAS H
407 SOUTH 33RD STREET
FT. PIERCE, FL 34947 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: PLUMMER, THOMAS H
Address: 407 SOUTH 33RD STREET
City-St-Zip: FT. PIERCE, FL 34947

Title: V () Delete
Name: HEMINGS, ALFRED
Address: 407 S. 33RD STREET
City-St-Zip: FT. PIERCE, FL 34947

Title: T () Delete
Name: HOLDEN, LEE
Address: 407 S. 33RD STREET
City-St-Zip: FT. PIERCE, FL 34947

Title: S () Delete
Name: COOPER, JAMES
Address: 407 S. 33RD STREET
City-St-Zip: FT. PIERCE, FL 34947

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: BALS, JOSEPH
Address: 407 S. 33RD STREET
City-St-Zip: FT. PIERCE, FL 34947

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: THOMAS H. PLUMMER

PRES

02/25/2009

Electronic Signature of Signing Officer or Director

Date